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Notes on Lectures. Jeff. Med. College 1849-50. Medical + Surgical Mitchel + Mutter

B. Y. Shelley

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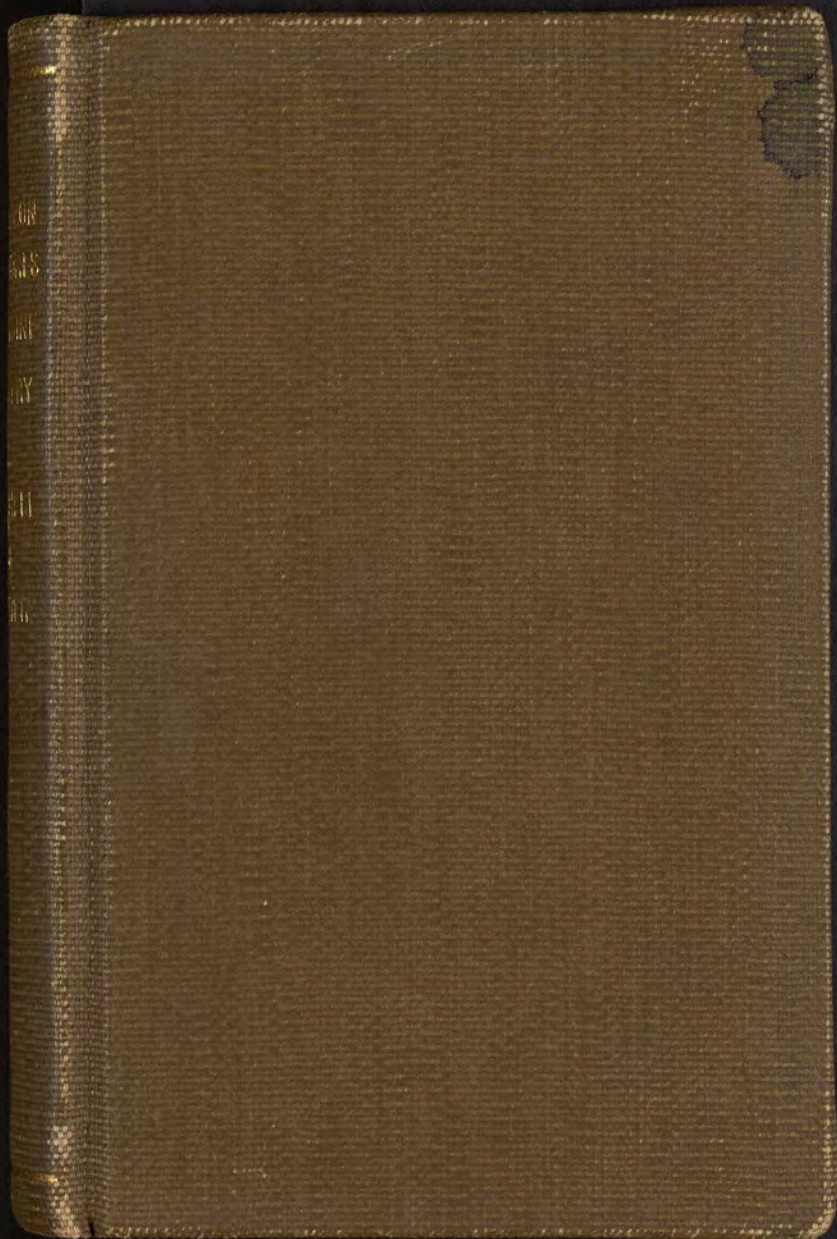
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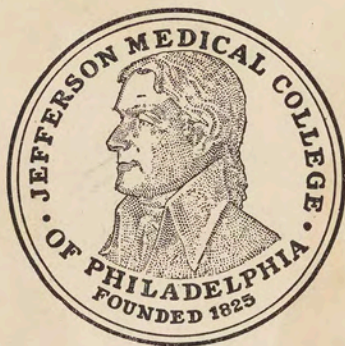
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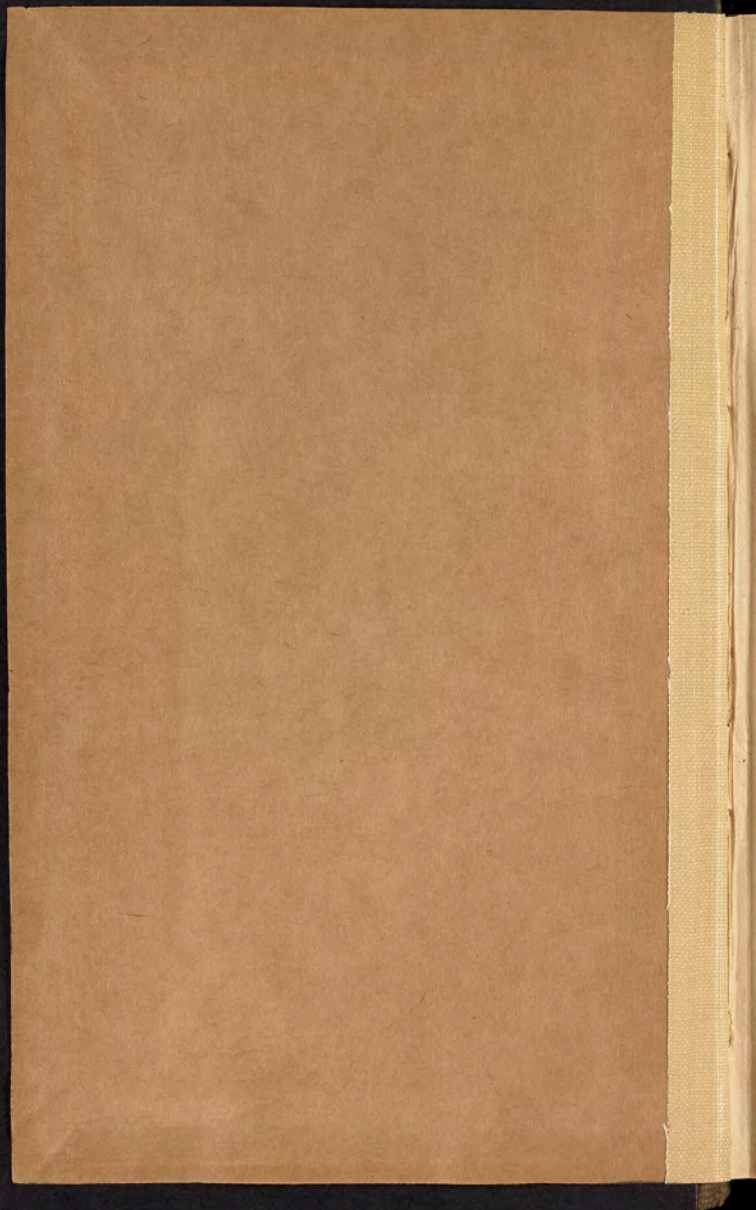


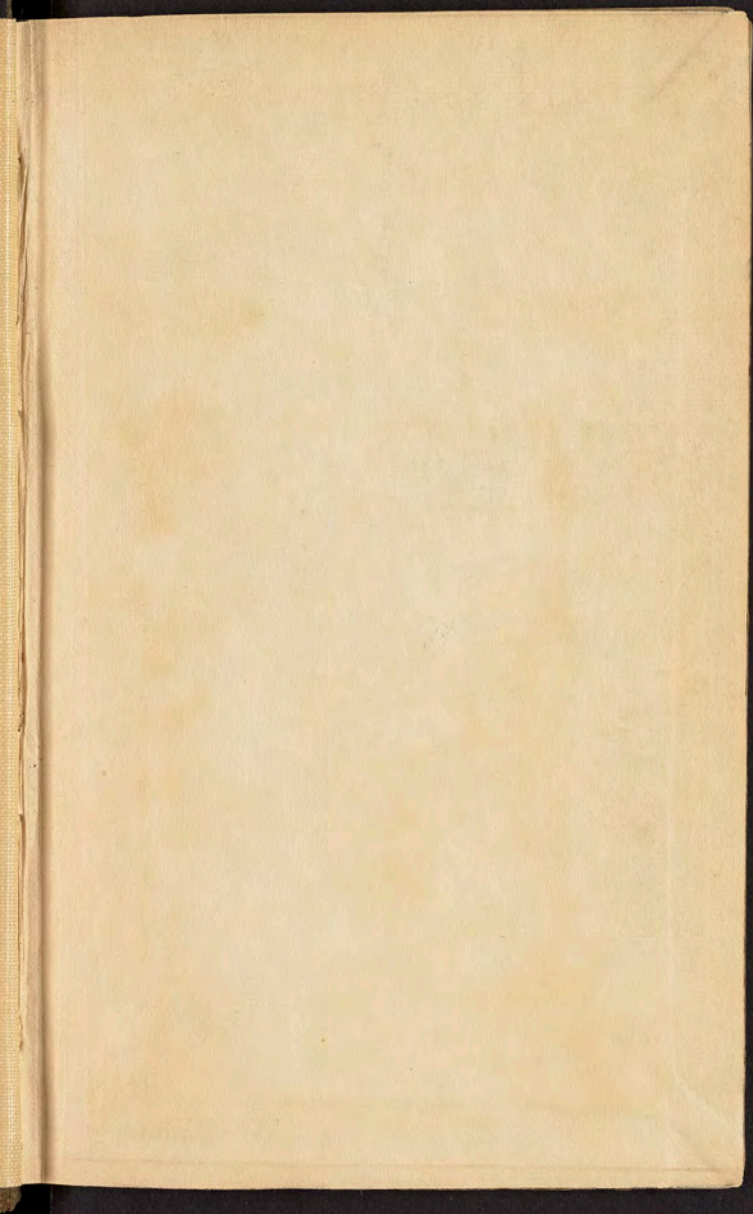
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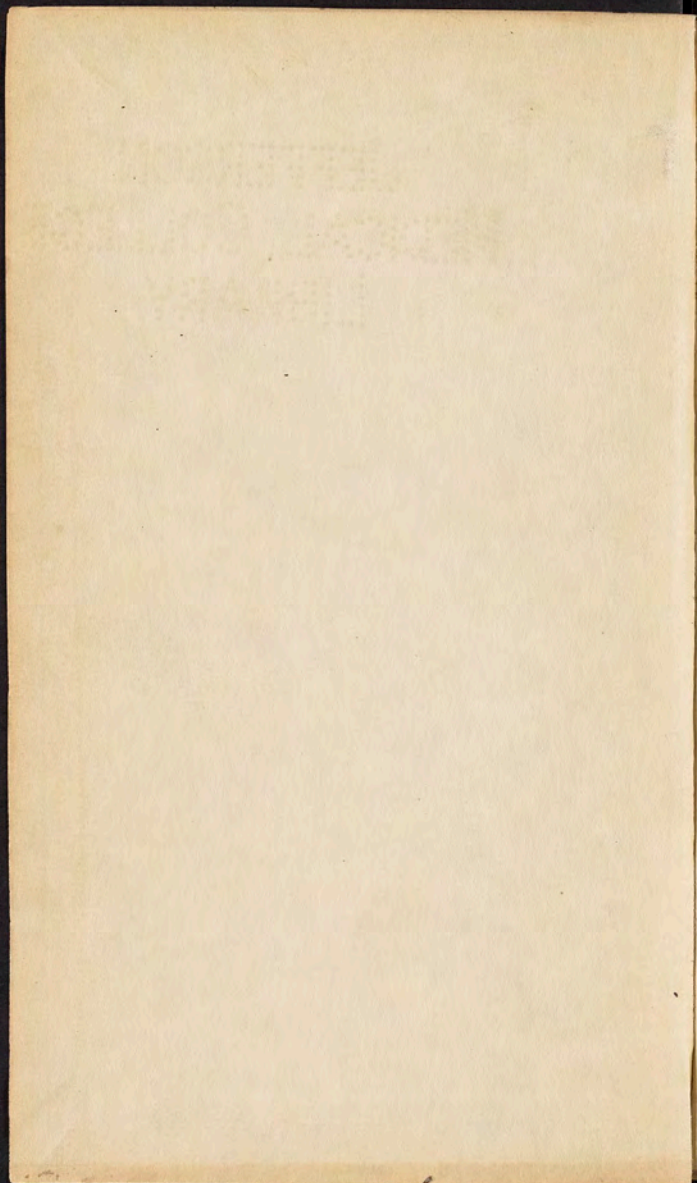


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Notes on Lectures.

Jeff. Med. College

1849-50.

Medical & Surgical

Mitchell & Mutton

One Drachm doses of Calomel
in Cholera. Will relieve
vomiting & purging.

Prof. Hooker
Yale Col.

Practice of Medicine
By Professor J. R. Mitchell

Typhoid Fever

Symptoms — The prodromic symptoms are 1st An anacastness over the eye brows followed by headache & slight mental incapacity. Ailment of stomach & slight diarrhoea. These may last from one day to a week & more. If the patient upon these symptoms transfers his residence immediately to another locality he will in most cases escape the full attack.

Attack — Headache on rising in the morning, chills &c followed by heat exacerbations in the evening. The skin may be moist over the whole body or on parts only or may be dry. Debility &c. Somnolency or morbid vigilance followed by some delirium but low, and sometimes very acute. Tongue not very dry at first but 16912 furred & coated,

Mitchell

Typhoid Fever

its coat sometimes peels off during the course of the disease without being accompanied by any amendment in the disease otherwise. There is dullness on percussion over the Spleen, Gurgling on pressure in right iliac region.

About the 7th day patches appear on the breast at first, about the 14th the Sudamina (small vesicles) on the nape of the neck, in many cases.

Dullness of hearing, ringing & buzzing in the ears. Emaciation is one of the most marked peculiarities in this disease. Ulcerations on surface of body.

Abscesses, which are favourable. Gangrenous ulcerations are unfavourable, both occur in grave cases sometimes. Any

torse rigidity is a fatal symptom.

There is often thoracic & respiratory disorder. If any peritoneal symptoms

supervene to an ^{otherwise} apparent amendment ~~whatsoever~~ in the disease the case will

terminate fatally, it shows that a discharge from the bowels has taken place into the cavity of the abdomen through the ulcerations in them.

Before the 3rd day this fever is difficult

Mitchell

Typhoid Fever.

to distinguish from some other forms of fever. All ~~diseases~~ ^{fevers} may be pronounced as Typhoid fever which have no symptoms peculiar to other diseases. Dry brown nostrils, Epistaxis, Dilated pupil are among the characteristic symptoms.

Sudden attacks of this fever are least dangerous, young age most likely least, especially females & in summer season. In winter this fever is the most dangerous except in epidemics then the reverse.

About 4th day of the first septenary disease of the glands of Peyer &c commences, ulceration of the ~~Larynx~~ pharynx &c sometimes occurs. Brain is diseased, Blood changed, is dark & diffluent.

Treatment — In the first 4 or 5 days an emetic is a good article to commence with, it will relieve the head ache if this is owing to disorder of the stomach which is commonly the case next to purge to clear the bowels, prefer a mercurial when there

Mitchell

Syphilitic Fever

are bilious symptoms present. Cold applications to the head or warm frictions where cold produces no beneficial effects, and when all these fail to relieve the head apply cups or leeches. Shave the scalp before you apply any topical remedies. Select your cathartics adapt them to the symptoms. In bilious cases mercurial, in Nervous combine with much Asafetida &c. in Adynamia use the least irritating & combine with Opium Camphor &c. If any marked remission take place which is sometimes the case about the 7th day give Quinia. If the case assumes the lying form which this disease sometimes assumes - patient lying in a trance as it were without much change. wrap him in a blanket & take him out in the country in some carriage - Give ice water in this disease add 5 drops Spt Camph to a tumbler of it if it alone cause uneasiness in stomach. Hyoscinum to produce sleep where sleep is wanted. prevent sloughs bed sores or heat with large flaxseed meal poultice

Prof. Mitchell

My dear Sir. I have been
greatly interested by the
in most cases. Most things (most)
your Colonel's office. I will be
with absolute confidence, or a letter
from my military and naval
with all other facilities to a general
rule. Colonel's office may be neces-
sary in particular cases. Your mil-
itary 1/4 to 1/8 gr. should be a very
from beginning to end of the war.
that you may see. I have not been
the necessary. I have not been
attention, but then again, I have
let in the matter. I have been
meeting as soon as they are known
which is not, more or less, than
heart is from not fully, which it
may even while public is good - your

Prof. Mitchell. Intermittent fever.

Intermittent in Remission.

Intermittent fever. Intermittent.

will seldom keep regular from beginning, taking place either earlier

or later than anticipated. In

Intermittent cases this will not occur

in the night. Intermitting fevers

in Intermitting it occurs in the morning

commonly, in Intermitting about noon, in

Intermittent in the evening.

Pathology - Cold stage, frequently the first

and stage - Intermitting, Intermitting, Intermitting

Intermittent - (Intermittent) Intermittent

Intermittent Intermittent. Cold & Intermitting

Intermittent Intermittent, Intermittent

Intermittent Intermittent, Intermittent

Intermittent Intermittent, Intermittent

Prof. Mitchell ——— (3) ——— Intermit. Fever

Treatment — Cold Stage. apply
Cups & Rubefacients to spine to relieve
the great pain in legs & abdomen which
is owing to spinal irritation give Opium
also in these cases. Apply warmth.
Cold water internally.

Hot Stage. — Cold water to surface, re-
frigerants internally as neutral Mixture
or Soda powder. An emetic when no
tenderness over stomach is present, it
acts as sedative as well as emetic.
Blood letting in some cases. Give Dr.
Dor. in 5 or 6 gr. doses every hour or so
in nervous or congestive cases. Con-
vulsion is relieved by Opium.

Sweating Stage. — If secretion is
not sufficient give sweating draught
of Quinia Ph. & Ph. Nid. when ex-
cessive give cold drinks &c. It is over
when brow becomes dry after sweating.

Prof. Mitchell ——— Intermitt. Fever

Treatment of the Intermittion
Second paroxysm may be congestive
in a high degree therefore ought to be
prevented — Use means to prevent the
attack afterwards remove disease. Give
enough Quinia during the intermission
no matter how you give it. Precipitate.
Ext. Cinchona may be used instead of
Quinia if you please. After you
have stopped the disease give some
three grs. Quinia every morning for
three weeks and you will have no
relapse. If liver is affected give blue
pill every night. In urgent cases
may give Quinia even during paroxysm
especially in the formula of Mitchell.
In some cases Quinia will fail to
effect a cure here you give some
other preparation of Cinchona or Arsenic

Prof. Mitchell

Intermitt. F.

In Quantans malaric appears to be the best remedy. Hydr. Cinnamomum of Quinia Biniod. of Quin. both in particular cases very valuable. In very nervous cases Valerian. Quin. In very chronic cases a dose of Opium every morning will cure it, it is depending upon nervous irritation. Upon the authority of Dr. Clark of Maryland a very strong decoction of Maple bark almost as potent as Quinia in some seasons more so.

Remittent Fever.

Dr. Mitchell divides Remittent into two varieties the Malarious or Autumnal & Non Malarious or Summer or Solar which occurs in high dry localities & is caused by heat.

Prof. Mitchell — Remittance \$

Summa from affecting brain and
stomach principally, amission food
greater than in autumnal here year
have liver stone & brain hemorrhage
affected. Difficult treatment necessary.

Dollar Remittance. Autumnal Remitt.

Doctor. Having sent blood much in
autumnal. Blood in this form, necessary.

even which require Summa de grat 3))
it. Coste naturally, 1000, 1000, 1000, 1000.

stomach. Autumnal Oct. 1st 10 to 15 to 20 days
in large stone in it of this year & 1000.

growing as a matter but every time house
and lungs especially with natural humors

in chest, very low purity in being about
specific, but must a more perfect com-

not be continuing even when your mag-
nity till reached and give a long-term or

the French in August. Sum of Summa. Relat
Sum on return. As an Commission

Witchell — Remd. 2.

After Remd. Autumnal.

Your Emities when you meet them

quite unframed center summer.

is great, not otherwise. Later which do not

in some cases must attend of others

your Northern animals (diagnose) you

as we in small quantities may at-

times, both horses from the same

or great Emities as to nature in some

the case may require early acquiring com-

of utility is every summer of some

to general movements in some cases of some

your Op. in fact (etc) when we necessary

Amphibians re. and things you know

with your observations

the descriptive considerations you

cannot give foregoing article must

therefore give additional article in

Witchell's edition of Natural History

which is most excellent.

Mitchell. William Brown

This form (Yellow) is a mixture of
a simple purgative. It is usually pre-
scribed before 7th day. When symptoms
indicate the end stage the patient
usually recovers but if they increase
on each day he will die on 2nd or
3rd day. The stomach & bowels
usually affected.
The stomach. Inflamatory cause
requires bleeding but this must be
done early & locally. Cool the bowels.
Cool the stomach and then
the bowels. In hot stage ice water
usually & externally. Calomel & opium
purgative. Emetics. Decides to purge or
vomits by ice water in a cloth &
applied to bare region. Nursing in
large bed with arms from beginning
onwards to a machine at a dose

Mitchell

Congestive Fever &c.

In second stage give Quinia acut. lead
apply blisters.

Congestive Fever.

If congestion is extreme you must
bleed for immediate relief. pre-
vent a second paroxysm. Opium
and Quinia combined.

Milk Sickness.

This is a Cerebro Spinal Meningi-
tis with a peculiar affection
of the abdominal viscera. Miltz-
brand of Germans. The disease
is communicated to man from
cattle, poison swallowed in milk
& flesh.

Variola

Febrile stage. ushered in by
chill &c. which occurs in the after-
noon which circumstance more
than any other ~~will~~ guide you in

Mitchell ————— Variola

in pronouncing as to what disease
will be developed. Papula first ap-
pear around mouth chin upper lip.
Other symptoms as nausea pain in
head back & limbs, white tongue &c.

In adults you have costiveness in
children laxity of bowels — These
symptoms will enable you to
make an easy diagnosis at an early
part of the disease. If you have great
nausea, much pain in limbs back &c
white tongue and have small pox
within 30 or 40 miles of your neighborhood
you may be almost sure of having a
case of the disease in hand.

Treatment — The indications are
relieve fever when too high
prevent disfigurement of the
patient &c. —

See back part of notes on Mitchell.

Mitchell ————— Scarlatina

Scarlatina — Simplex. Anginos.
Non Eruptive. Pulse in all varieties
more frequent than you have it
in any other disease.

Simplex in this form you have
throat not much affected all symp-
toms are mild. Anginosa you have
stiffness of Jaw, throat much affected
crust in fauces papilla upon tongue
large. Non Eruptive occurs in adults
confined to throat may have some
itching of skin but otherwise skin
not affected. —————

Anginosa. You have vomiting
instead of Nausea as in Simplex as
precursory symptoms. All symptoms
are exaggerated.

Maligna. May commence as Angi-
nos. but you will soon have some

Mitchell

Scarlatina

marked local pain &c. all symptoms
much aggravated, headache intense
pulse very much excited at first
afterwards very frequent & irregular. Coma
&c. breath very foetid contraction of
Jaws may have vomiting & purging,
Death may take place second or third
day. If you have Coma &c. as prin-
ciple symptoms you have Nervous
form of Maligna. In Children and
especially in winter you are apt to
have dropsical effusions on 14th or 15th
day - may have them in adult. Not
dangerous if managed properly. In
most active stage you bleed after
which warm bath & Dover's powder
in evening, same as you would treat
a case of Album. Urea. will generally
cure this affection. - (that is the
dropsical effusions you treat thus)

Mitchell

Scarlatina

Scarlatina is the shortest of the eruptive fevers from first accession of fever to the eruption it being two days.

Malignant cases prove often fatal in a very short time by the effects of the poison. Incubative stage last from 8 to 13 days.

If you loose one case in a house you are apt to loose more unless all other patients are removed from the apartment or house in which the one has laid.

Prognosis. Nervous cases are usually very dangerous. Haemorrhagic also change of temper, set teeth, starts & screaming of the Child, early Delirium Coma &c. unfavourable.

Treatment. Dr Rush's practice was to give plenty of Calomel, mixed

Oriskany

Devil's

it even with friends and with all

other means he administered. When

he collected an excellent article after

staying in Philadelphia also according

to another author. Another author gives

Capitulum. The Lathropia is common

all the Lathropia's look with the hair

and a red the hair longer & give a

Lathropia also are the same.

In Michigan & Montana cases give

each. America, warm belt, other than

about. The human only on children.

all there are actually described as

very to their authors. The children

treatment has been accepted by the pub-

lished however & is excellent. One of

them - Chas. Pitt. 31. Dec. 1881. No. 311

Agnes 21. kept in dark place. of the same

21 to 1/2 pint water & give in little spoonful

down from water. Will also as work

Mitchell ——— Scarlatina
externally, warm when skin is cold
cold when skin is hot.

Dr. Mitchell recommends following
plan. In prodomic stage direct your
patient keep his bowels open apply ex-
ternally ablutions of Solut Chlorid. Soda,
bleed in some cases but avoid that as
a general rule, only admissible in Con-
gestion & inflammatory cases. In Con-
gestion cases apply cold to head & warm
to feet & hands, bleed topically, may
open temporal artery. Cathartic Enema
or Cathartics when head is much affected
Relieve Stomach when oppressed by some
mucous. if it is depending upon acidity
give ammonia. Skin yellow & head or
stomach much affected Mercury will
relieve it. May have an attack upon
bowels, diarrhoea of yellow watery stools

Mitchell

Placental & Fetal are both affected quite

Michael & I will act like a champion

defending ourselves & affection of friends.

It is also great to retain action of heart.

When pulse is very much affected & gone

regularly combined with some other

marks it agrees with stomach & continues

as it will pulse is seldom undisturbed

affects the brain. Great artificialness

arise by cold water in turnery &

also relations of depending upon heat

of surface, aneurism when caused by

overexertion, affection of brain, change

lies, but patient's hands. in Phlegm

causes flying aneurism one of the best

remedies as it is in other cases of nervous

irregularity. Objections are necessary.

Mostan immutability below the seat.

Of course when violently become incommensurate

the. Hypothese depending is decided upon truth

Mitchell

for the purpose of mutual elimination. If an
intermediation or connection second which is
after discussion of it the three elements
for treatment of throat are emetic of great
contraindicated by state of stomach or bowels
which also acts on the liver or duodenum. Cough
dry & hoarse always & organic result.
Among the means coming in throat by
coughing out with great force comes with
a bag of paper in some cases. Chlorine
gas or when throat looks with
excessive gas. See internally & externally
to throat, but not externally alone. Put
throat once a day or often, both ways
great mercurials.

Do not mercurial phlegm forming a
case of leucorrhoea. Blood purg
some cases. Do not take when you are
not want to bleed. when emetic is
useful & stimulate & use when last, also

Mitchell

Scarlatina.

Give Iod. Potas. one or two grains several times a day continued three or four days & you will prevent the secondary or Eruptive attack. You apply cold abutions to skin where skin is hot & warmth where cool in all cases of Scarlatina. Action of heart must be brought down by Digitalis Prussic Acid Belladonna. & Antacids where acidity is present. Ammonia 2 to 10 grs. where stimulents are necessary combine with belladonna which article Dr Mitchell gives as prophylactic, and also during whole course of the disease, his success has been remarkable. Dose of Belladonna. 1/20 gr. to a child one year old.

The prophylactic properties of this article is pretty well established. Homeopathy ~~being~~ as it is has been productive of some good.

Mitchell

Measles

The redness of measles is characterized by its cloudiness - is suffused like the redness of spurious vaccinia. It appears first about the roots of the hair about the 4th day.

In some cases you have little vesicles or blebs. In another form you have on sixth or seventh day dark spots which will alarm you if you do not remember that this occurs in some cases but without any danger. Death ensues from one cause - suppurization of the lungs.

Treatment - Patient should be kept in bed. Not much therapeutic treatment is necessary in mild cases. Give mild food attend to bowels, give Castor oil, attend to the lungs. Retrocession must be prevented, or where it

Mitchell

Measles

occurs must bring back the eruption by warm bath & wrapping patient in blankets & give Alum or Mustard Emul. Camphor or Ammoniacs Diaphoretic or if these fail Cold bath immediately followed by warm bath. If depending upon affection of any particular organ attend to that & you bring back the eruption by removing the cause of the retrocession. In some cases you must bleed or stimulate as the case may require. In some cases Opisthos necessary to overcome nervous irritation or Hares demarcotized land. is best.

Parent hypospatic Pneumonia by change of position frequently turning patient on his face & other proper treatment. In local inflammations Cal. when other remedies fail, in high doses.

Mitchell

Rubella

Conjunctivitis as secondary affection
give $\frac{1}{4}$ to 1 gr. Iod. Potas. three times
a day & Sulph. Copper or Nit. Silver
Collierium. To bring out the erup-
tion first stage or end of it may
give Saffron tea or Iod. Potassium

Erysipelas.

Inflammation of skin and sub-
cutaneous cellular tissue, diffused
and generally progressive. Sometimes
it attacks the venous system which
form is contagious & is the most dan-
gerous. If the arterial system is af-
fected danger is not so great. —

Attacking the venous radicles it is
a capillary Phlebitis and this is
the most common form of the disease.
Some authors divide it into simple and
phlegmonous, most properly divided into

Mitchell

English and American. The latter is

any language. Obligations arising

with testimonies that have been

made for others it is apt to be true

that to the brain of truth attached

translation will be to have things in

English.

translation. In American literature

and largely when not combined by

the nature of the evidence. To be

in truth when there is to be

to some extent again. In the con-

dition when you have better

as follows by of eyes any more

terms &c. which are by other

expressions, things. Showing

Mt. Olive and around the first

co. including it. John of 1807 & 1808

in also present. Judgments

will not be true. Moments.

Mitchell

Erysipelas

Some persons are predisposed to Erysipelatous attacks which will be formed owing to some natural evacuation being suppressed. These cases must be treated according to indications, keep bowels in order where costiveness is the cause which it often is & the attacks will not take place.

The Nitrate of Silver should be applied in solid state and immediately. In Malarious districts Quina is often necessary in treating the disease.

Erythema.

This is the simplest kind of inflammation of the skin. It lies from one part of the body to another. You have heat, redness & slight swelling of the skin. In some varieties you have little papules in others little tubercles, in another

Mitchell

Erythema

form - Known - you have large lumps
deep in the skin appearing suddenly, in the
night while patient is in bed, & weak
women are very subject to it. Erythema
Intertrigo occurs in children caused by
friction as from caps about the ears.
Dore Nipples is the same disease. Ery-
thema Annularum - begins in a spot
& spreads being of the appearance of ring
worm except that you have no eleva-
tion of the skin.

Treatment. Apply lead water, in
some cases poisonous applications.

Nit. Silver. Bleeding & purges may
be necessary: when the Constitution is
affected treat Constitutionally.

Urticaria

Nettle rash. So called from its
appearance. Surface elevated, white,

itchell

Urticaria

eruptions have a red margin. Distinguished from Erythema by its flat tops & its not being so deep as

In children caused by teething &c adults caused by excesses, unusual diet, Copeiba, Muscle fish in stomach, &c.

treatment. An Emetic every morning
ginger, Spirit lotion. Flour or
Cust. Linc. dusted over it will
diminution. If Cramps occur
which are common apply tight Gae
or tourniquet.

Roseola

A deep rose coloured efflorescence
sometimes of round form at other
times oblong. Is not contagious.
Appears usually on trunk or limbs.

Elevated surface remains smooth.

caused by correcting symptoms, remove Cause.

Mitchell

Erythema

form - Known - you have large lump,
deep in the skin appearing suddenly, in
night while patient is in bed, &c. &c.
women are very subject to it. Erythema
Intertrigo occurs in children caused by
friction as from cap about the ears
One Nipples is the same disease. Ery-
thema Annularum - begins in a spot
& spreads being of the appearance of a
worm except that you have no eleva-
tion of the skin.

Treatment. Apply lead water, &c.
Some cases poisonous applications,
Vit. Silver. Bleeding & purges may
be necessary: when the Constitution
affected treat Constitutionally.

Urticaria

Nettle rash, so called from its
appearance. Surface elevated, white

Mitchell

Urticaria

Elevations have a red margin. Distinguished from Erythema Knoxae by its white tops & its not being so deep seated. In children caused by teething &c. In adults caused by excesses, unusual articles of diet, Copaliba, Muscled fish taken in stomach, &c.

Treatment. An Emetic every morning purging, Spirit lotion. Flour or impure carb. Lime dusted over it will relieve irritation. If Cramps occur which are common apply tight Garter or tourniquet.

Roseola

A deep rose coloured efflorescence. Sometimes of round form at other times oblong. Is not contagious. Begins usually on trunk or limbs. Not elevated surface remains smooth. Cured by correcting symptoms, remove Cause.

Mitchell

Gastritis.

Inflammation of Mucous membrane.
you have first change in secretion - sus-
pension ^{of same} ~~followed by~~ suppression, followed
by excess of secretion, softening, Gangrene.

In acute inflammation the adhesion
is in patches, in hyperaemia it is dif-
fused which is the first step to in-
flammation.

Gastritis

Erythematous inflammation of the
Stomach or Acute Gastritis is caused
by irritating substances taken into
Stomach, by suppression of Natural
Secretions. &c. &c.

Symptoms. Tenderness upon pressure
of Epigastrium, irritability of the organ
together with general febrile symptoms.
Sometimes you have head ache & delirium.

Treatment. Ice water the great remedy
evacuate the bowels by large Enemata &

Mitchell

Acute Gastritis

It is to be discharged again immediately to
avoid the absorption of the water - These
may be sufficient in mild cases but
when they fail you bleed generally some
times, but topically most generally, apply
Misture Symplicum &c. As soon as the
Stomach will retain it you give a
large dose of Calomel, (or acid. Phosph.)
as a cathartic from $\frac{1}{2}$ to 2 grs which will
be retained if Calomel will not. External
application of Opium plaster will of-
ten allay the irritability. Cold & mucilagi-
nous drinks, or lime water & Milk,
a cold infusion of Rhubarb, Neutral
Mixture, simple hot water, &c. &c. as
patient can swallow it. Dry warm
poultice over stomach - One or the
other of these will settle the stom-
ach. If the case is highly nervous give

Mitchell

Gastritis

an Anodyne as Opium pill (long kept)
In typhoid cases, brandy & water or even
infusion Capsicum. An Emetic itself
where all your anti Emetics fail to settle
the stomach. A large Enemata of
Spir. The case otherwise must be
treated as symptoms may indicate
The acute often terminates in

Chronic Gastritis.

The disease may be chronic from
the beginning, cause not acting with
much force as in acute Gastritis —
Symptoms. You have Eructations acid
vomiting &c. or discharges from stomach
may be of ~~any~~ taste & odours imagin-
able or have no taste &c. at all. If the
discharges are Mucous you have inflam-
mation ~~very~~ ~~of~~ ~~the~~ ~~stomach~~ is thrown up you
have ulceration.

Mitchell

Chronic Gastritis

Patient may complain of a sense of emptiness about the stomach, sense of weight, or of sinking, tenderness of epigastrium, ~~Pain~~ sometimes of stomach is empty, at other times, or other features if stomach is full. The pain is generally most severe if it occurs at intervals. Tongue may be of any appearance, furred, smooth papil-
lous, ulcerated, blistered, &c. Teeth decay or may ache without becoming carious. You should always look to stomach if you have the teeth ache without being decayed. — You have generally costiveness of bowels in this disease; Nervous symptoms, irritability of temper or depression of spirits, head ache &c.

Prognosis — In a prolonged case of Gastritis if the feet begin to swell you may look for a fatal termination or else patient will be well soon, generally the former.

Med. Coll.

Chronic Gastritis

Diarrhoea a very unfavorable symptom in an old case.

Treatment. Aliments, Care in irritation
relieve the inflammation, afterwards
tonics &c. In some cases patient has
no feeling in the organ as if he had no
stomach, here horse back exercise and
what Dr. Chapman calls the punchenilla
practice, &c. of great benefit.

Ulceration

In ulceration of stomach you have
vomiting of purulent matter &c.

You give Gums & Nitric Acid
enforce strict diet. The diet scheme
is the best in Cancer of Stomach.

In acidity when nothing will re-
main on stomach Charcoal (animal)
is your remedy, also the stronger
emetics.

Mitchell

Chronic diseases of Stomach

Gastralgia. Muscular Coat is principally affected, great similarity between it and Muscular Rheumatism - pressure will rather relieve than increase the pain - Treatment. If owing to food having been taken in Stomach which does not agree have it removed. In other cases for present relief give *℞* Guaiacum, Sand. or Camphor &c. Oil of Amber, externally applied this is the most effectual remedy for Muscular Rheumatism also.

Constipation

May be overcome by some articles of food as an Apple at bed time, bran bread, peaches &c. If these fail give Cold water Enema. If this will not answer give Magnesia - Super Carbonat Magnesia is soluble where Calced can not be taken. Rhubarb &c. —

Mitchell

Yorpor.

Yorpor of bowels, No hard stools. owing
to want of tone in muscular Coat. Your
best remedy is Strychnia with some
purgative article. (Strychnia & Sulphur
are great as a remedy for Haemorrhoids
Owing to hepatic Constipation Give
pill consisting of the following articles

Blas gr. i

Rhubarb gr. ii

I. Antim. gr. 1/16

Calomel gr. 1/8. with a little

Long con-
tinued -
several
times a
day if
necessary

Soap - (Mitchell's pill - this is)

When torpor is very great large doses
of Cathartics having no effect empty
the rectum with the handle of a spoon
& apply cold water to abdomen after
the purge has been swallowed.

Invagination

Produced by contraction of bowel and
the part contracted falling into bowel

Mitchell

Diseases of the Bowels

below, which is distended with gas.
Concretions obstructing the bowels
which are owing to Carbonates taken
while there is a deficiency of acids—
all these are sometimes the cause
of obstinate Constipations. Hernia
will be found to be the cause some-
times and you ought always exam-
ine your patient as regards this in
cases of Constipation.

(In Recapitulation Dr Mitchell
says— In Scarlatina Sympathetic
affections of the brain must not
be mistaken as to its Character, as
the treatment depends upon the na-
ture of the cause which produces
Cerebral disorder. In all cases of
affections of the bowels Ipecac. is
of much value combined with your
other remedial agents.

Dr. Mitchell

Recapitulatory.

In affections of the Stomach where you have the skin not performing its functions you must get it to do its duty before the Stomach will be relieved. In Pyrosis which is owing to a very chronic inflammation of the Stomach Emetics are sometimes of the greatest benefit. Gastralgia relieved immediately by a few drops Hydrocyanic acid.)

Cardialgia. you have pain in a circumscribed spot near the pit of the Stomach nearer the Cardiac end of the organ, pressure increases it - it may be depending either upon acidity or the opposite state of the ingesta together with an inflamed state of the region of the Stomach. You remove the inflammation & then give tonics. Strychnia when Muscularity debilitated by

Mitchell.

Duodenitis.

Distinguished from affections of the Stomach by observing the location of the pain and the pain following your meals several hours after they are taken. You give alteratives and Nit Silver in pill long kept so that it will go through stomach before being dissolved.

Enteralgia - Colic.

Colic is a neuralgic affection of the mucous membrane of the bowels.

Flatulent is the most common variety - brought on by improper quantity or quantity of food causing irregular action of Muscular coat of the bowels thereby confining flatus.

Treatment - Relieve pain, remove the cause & give time to bowels. If pain is very great relieve it at once which is done by Opates given per rectum which you

Mitchell

Colic

Can remove again after their effects
are produced which you do by injection
of water. Apply hot to abdomen, Sym-
ptom to spine which is excellent in
neuralgic affections in any part of the
body. Cathartics of Magnesia which
neutralizes the gasses is the best article
of this kind. Oil next.

If the affection has been caused by
Cold you must operate upon the skin
Give Dover's powder, very hot foot bath
Carmenatorum warm bath; Cathartics.
Afterwards tonics may be necessary
Iron in Anaemic cases, Quinia when
there is loss of appetite in doses as you
give it in intermittent fevers - this
is the most effectual article to pro-
duce an appetite in all cases.

In Billious Colic you have given
here bleeding is often necessary. Calomel

Mitchell

Colic.

Bilious cases arise from Malarious influences Guinea therefore often very unbeneficial. Give Opium to relieve pain as soon as you can but where action is high must be cautious in exhibiting such articles.

Lead Colic.

In this variety the principle prodromic symptoms are sallowness of skin & morbid blueness of the gums.

In this form you have no tympanites Brain is attacked in the worst cases, you have Delirium & Convulsions which prove fatal usually. The whole Muscular system is affected as is shown by the spasms.

Treatment. In severe cases you relieve pain in the first instance by Opium & revulsives. Opiate fomentations to which add 10 grs Iod. Potas. if Op. will not relieve

Mitchell

Colica pictonum

the pain. Give the following pills

Antim. et Potas. $\frac{j}{\text{gr}}$

Hydrag. Chlor. M. " $\frac{v}{\text{gr}}$

Morph. acetal " $\frac{ij}{\text{gr}}$. every hour

hour until an impression is made.

You must open the bowels. If open

have paralysis apply a splint to the

limb which will relieve it. Calomel

and Opium are your main remedies

given as case may require.

Acids & Cleanliness prevent the disease

Diarrhoea.

This is an inflammation of the

Mucous coat of the small intestine

Symptoms. Pain, irregular discharges

from the bowels. Burning in palms of

hands & soles of feet. Tympanitis generally

which if suddenly increased and per-

also you have perforation of the bowel

will kill patient. Shifting about is always a

bad sign in this almost as fatal as in Typh.

Mitchell

Diarrhoea

Treatment. Topical bleeding where
pain is seated. treat antiphlogistically
as you do other inflammations. Gentle
purges, Calomel in combination with
the articles when the seat is in the
upper portion of the bowel. Sip a rag
in Br. Opium & apply it over the seat of
pain if pain is severe & over it a
warm poultice. Acet. Plumb when
the seat of inflammation is somewhat
lower down. Warm bath in all cases.
Mucous diet & Mucilaginous drinks
Blue mass in small doses. Chalk
where stools are acid. Combine it
with Op. & Minc. And when discharges
are alkaline give acids Mixt. Keep
litmus paper with you to examine
the case. You have great irritation
of the rectum for which an injection
of melted butter or lard with Sandalwood

Mitchell on Diarrhoea

is the most soothing application. Astringents become necessary. Infusion of Sassafras is an excellent one especially for Children it is also tonic. Mineral astringents are generally preferable.

Chronic Diarrhoea.

The isolated glands are commonly affected instead of the aggregated as in the acute form.

Treatment. Limit your diet to barley water &c. & give Mucilaginous drinks. Give small doses of Blue pill combined with Opium which will often succeed in the most inveterate cases. Turpentine or Copaiba in Mucilage. Dr. Ferri Chlor. especially where there is Neuralgia with want of tone. Nux Vom. also. Tight bandages. bathing.

Cal. Op. Astringents Copaiba &c. are the great remedies.

Mitchell on Dysentery
Called also Colitis as the inflammation
is confined to the large intestines principally - The rectum is also commonly affected.
Heat alternating with cold appears to
be the most efficient cause, Improper
quantity or quality of the ingesta also
common cause.

Symptoms. At first you have pain
in epigastric region then in umbilical
& then in hypogastric region. The stools
may be of every variety of appearance. If the
rectum is affected the distress is great.
There is a peculiar earthy smell.

Chronic Colitis follows usually
acute epidemic cases, or rather is
more commonly found to follow than
sporadic cases of Dysentery, especially
in old in health. You are apt to have
hemorrhoids & swellings in Chronic & in
some acute cases.

Mitchell

Dysentery

Treatment. In acute form you bleed in many cases - Some epidemic however will not admit of it generally but may touch the abdomen. Ensite the circulation to the surface by warm bath. Dr. Mitchell applies cups to the spine with great benefit. Inject Colon with cold water which you can do by successive efforts. Purges are necessary Oil & Calomel best.

Bitartrate of Potas according to some as purge of great value in this disease which you ought to give a trial. Opium the great remedy. Give it in large doses. Keep patient in horizontal posture all the time must not get up to stool. In that the Sudorific plan may be adopted which is of great value. In other cases this would be impracticable besides. Altho it is harmful anyhow.

Mitchell

Dysentery

Calomel Ipecac & Opium combined
with Cal. $\frac{1}{2}$ gr. Ipe. $\frac{1}{2}$ to 2 grs. Opium
in sufficient quantity pro re nata is the
most effectual remedy. Tenesmus is
allayed by injections of Cold water
for the irritation of the rectum give
injection of melted lard & Sassafras
which is effectual or if no liquid will
be borne give Acet lead in solution
or Nit Silver as injection or if even
these will not be borne to support
Opium. Some epidemics are bene-
fited by blisters. Tight flannel across
lower abdomen is of much value.
Must be farinaceous & mucilag.
a table spoonful or two at a time
In Chronic cases you give ad-
stringents both per mouth and
per anum.

Mitchell

Cholera

The cause of Cholera Dr Mitchell thinks is fungi. He has observed fungus and posits on Bakers' bread & on various articles, literally covering them, about the time Cholera was prevailing.

Pathology. The serum & salts of the blood are diminished often to a very great extent, which is effected by the watery evacuations from bowels. When carbon is in excess, it cannot be carried out of the system from the blood not circulating freely, or the diminished quantity of the salts which appears to be the natural vehicle for its removal. It is in great excess.

Symptoms. At first slight diarrhoea, nervousness, fear &c. all cases exhibiting any choleric symptoms at all are probably owing to the same

Mitchell

Cholera

the Cause - the poison only not being re-
quired in sufficient quantity by the
system or the system being in a
more unfavourable state for its full
effects to be established, otherwise in
Cholera season you would have
more cases fully established where-
as you have many cases of the dis-
ease because in a mild form they
are not supposed to be Cholera at
all. A case fully developed will
exhibit following symptoms -
Sickness of stomach, vomiting &
purging, stools have appearance of
rice water. pulse at first not af-
fected but soon gets small & hur-
ried. Skin at first pale then of a
lead colour, intellect not much
affected. Cramps in lower extremities

Mitchell

Cholera

at first but also in Stomach & upper extremities soon after. It attacks commonly in the night. There is a sense of extreme exhaustion, skin cold, livid, patient complains of being hot although skin is cold. Thirst is great, tongue moist but cold, respiration oppressed, intellect sluggish, disconcerted of mind. Cramps are not always present, retention of urine. Antecedent symptoms to an open attack are diarrhoea or constipation Cramps in Calves of legs per se. Emigrants or soldiers coming into a cholera district will be attacked suddenly - no antecedent symptoms at all

Mitchell

Cholera

Treatment. In the antecedent stage check the symptoms bleed when you have a hard pulse for the Diarrhoea give Cal. & Op. $\frac{1}{2}$ gr each with some of the stimulant Treat as you would an other case of Diarrhoea excepting the use of Purgatives. Forinaceous diet with a little Spirits. If Patient is costive give Enema or if necessary a little Cal. &c. In an open case of Cholera when you have vomiting purging & Cramps &c you arrest in the first place the discharges, for this purpose use Scantines as trinegents and alteratives combined As pill of Cal. Op. & Acet. Plumbe. with Cap.icum a grain of each very

Mitchell Treatment Cholera

frequently repeated in bad cases
this is better than to give large
doses of Op. you can control the
case better. Apply Cold, frictions
Iorniguit or warm bath for relief
of spasms Cold cloth immediately
to cramped part or Chloroform
best, this give in doses of 15 drops
often repeated. This is Dr Mitchell's
plan of treatment. Choleric
Symptoms relieved you are apt
to have Typhus symptoms which
must be met by proper remedies
Chloroform appears to be a great
remedy, being sedative to nerves
& stimulant to circulation. Abstrac-
tion of blood from local inflame-
ment necessary. Emetic medicine
which consists of Mustard a tea-

McTchell

Cholera

1 Spoonful with two teaspoonfuls of
Common salt given as often as found
necessary found very successful
in cases of Collapse by Dr. Stokes
of N. Jersey & others. Carb. Soda
a great remedy in this disease
according to an English Surgeon
Beef Steak well peppered & salt
according to Quarantine Physicians
at New York, this was found to
have an astonishing effect. Nu-
trition & Salines being wanting
such treatment is rational.
Upon this view of the case the
best mode of treatment will be
Carb. Ammonia, Saboraco's liquid
internally & latter as lotion ex-
ternally also as in scarlatina
this will diminish the red globules of
blood which are in great excess, and

Mitchell

Treatmt. Cholera

increase the watery & saline constituents which are diminished, or use Chlorine washes rather than Saharaes Liquid. In extreme cases counterirritation of great service use here Synapisms or Actual Canthary or Turpentine & Ammonia liniment along the spine applied by a long strip of cloth with a heated iron pressed over it until it is dry. Excessive reaction sometimes follows depressed state here you abstract blood, &c.

For Typhus which is common after a case has been brought out of former state you may use Spenc. Cal. &c. Nitrate Silver in particular. Restore functions of the kidneys by warm bath together with such dietetics as will

Dr Mitchell

Cholera.

not act on the bowels as Spt. Nitric in doses of ʒj . For Indigestion which is often a sequel of this disease, deport patients, be ought to be taken into a new locality where every thing is changed.

Inflammation of the Mouth.

Treatment. Use cold mucilage astringent washes. If caused by mercury do not use Acet Lead it will stain it black.

Ulcers in Mouth. — at the time of forming touch with Nitrat of Silver. Use same also when they are fully formed.

Gonorrhea

Abstract blood where indicated apply cold, as ice. Cold mucilage.

Mitchell

Tonsillitis

Introduce your finger with a cloth wrapped around it dipped in cold water & wipe the viscid matter off the surface of tonsils & throat. May use the domestic Gargle consisting of Sage tea honey & alum or borax. Nitro-silver excellent.

Laryngitis. (acute)

Produced by various causes. among the most common are heat & cold. Sore throat often runs into this disease. inhalation of vapours of Eucalypti. Symptoms. Hoarseness change of voice, this is a certain symptom. is always occasioned by a change in larynx, an inflammation in it. you have Cough, pain on pressure. Oedema taking place you have difficult inspiration while expiration is comparatively easy - This

Whitehall
Lampyris
is called but never Lampyris
have you here something of glorio
as you can find by examination
with finger which distinguishes
it from Lampyris. The Columnaris
Lampyris takes of Lampyris lar-
vae glorioles are indicated and
Lampyris suffocation when extreme,
this is sometimes called glorio
glorioles.
Treatment - If the disease ac-
cides you must not but means
for relief. Bleeding, Emetics, Purgatives
much good effect - in the treatment
of this in the case. Examination
of the body of the animal to the
applying the heat of the
parts.

Mitchell Chronic Laryngitis

This disease may depend on Scrophulous, Syphilitic Tuberculous or other specific Cause

Symptoms - Hoarseness, pain on pressure, there may or may not be a cough. After ulceration has taken place food will fall into the larynx producing cough at first but after awhile foreign bodies seem not to cause so much irritation if any at all. After the disease has progressed for some time you have hectic & Aphonia may then take place - this is called Laryngeal Stenosis - the parts being in motion when the person is talking you must prohibit talking.

Treatment. Treat as Cause may direct. Applications of Caustic

Mitchell Laryngitis
In many cases it is important
in the treatment to have an issue
in some adjacent part. Emetics
highly beneficial in this as in
other inflammations of mucous
passages, laxatives - Diet open
patient.

Croup.

The seat of the inflammation
is commonly the trachea and
larynx both, the bronchia also
often implicated - it begins in
the pharynx in some epidemics
Croupal attacks are very apt
to assume the Membranous form
when Syphthentic diseases as
Scarlatina &c. prevail upon are
therefore particularly on your guard
at such times.

Mitchell

Croup

Treatment of Croup - must be prompt. The disease being inflammatory & spasmodic must treat antiphlogistically & subdue spasm if present & prevent when not present. In the first place give an Emetic of I. Ant. This is an excellent Antispasmodic in these cases. Especially where there is a diphtheritic state of the blood with the case require heavy doses of Med. to produce any effect. After the Emetic the warm bath - If this treatment has not done any good you repeat it immediately. Afterwards give a dose of Calomel in all cases & you will not have a relapse. Application of Calomel in powder thrown into pharynx excellent remedy.

Mitchell

Croup

An application of Tobacco
to throat externally a plaster
of Plv. Camphor with lard
spread thick on flannel & applied
upon anterior part of throat and
chest most valuable to guard
against spasm and as a deriva-
tive this is better than Tobac.
In many cases bleed, in all
that are not relieved by the
foregoing treatment. may bleed
from Jugular vein. in these cases
may apply I. Ant. cin. tr. I. Also
where emesis is difficult to
produce mix two articles to-
gether. Must give Nauseants
in this disease as I. Ant. $\frac{1}{4}$ gr.
every fifteen minutes. By applying
I. Ant. in very strong solution upon

Mitchell

Croup

will produce the eruption in a few hours. apply it with a rag saturated with the solution.

If membrane is formed you can see it sticking up through epiglottis can feel it also. Give an Emul. to dislodge it & Opt.

Yarrow for Anus & apply external remedies. If efforts & endeavours fail to disengage the membrane must resort to the operation of Tracheotomy for mode of Dr. Parcaast the best. He keeps edges of the wound separated by a wire around the neck both ends fastened in the wound by being bent into hooks, also a piece of the larynx removed to prevent closure of the opening. May use Dr. Green's application of Nit.

Mitchell

Bronchitis

Bronchitis. in the usual form is not a very serious disease it is very common and not dangerous unless terminating in Chronic disease which is the most dangerous when minute air cells are affected.

Treatment - Bleeding, Nauseant Colomel. No mischief from Col. if you stop using it upon the first appearance of its effects. relieve the prominent danger & then relinquish its use. Blister is often valuable in this disease. Naturally, give demulcents as Sugar & acids. Sugar Gum and some Nauseant makes the only good expectorant add Opium. Air passages clogged with mucus causing asphyxia must give Stimuli

Mitchell

Bronchitis

together with an Emetic as Cop-
Hive Syrup or Emetic worked
with a little brandy & warm water
when this occurs (Asphyxia) you
have finger nails &c. turn blue

Chronic Bronchitis.

Diagnosis impossible except
by examination of case with
the Stethoscope.

Treatment - Bleedings, Emetics
or Nauseants, Alkalines to re-
move the thick viscid mucus
for which Carb. Soda is the best.

The balsams, revellents, when
ability is great Cubics of great
utility so also is Coparb. &c. Iodine
Mercury. Inhalations. The respiration
to protect the air passages from
cold &c. Application of Nit. Silver
see mode of Dr. Green.

Mitchell

Pneumonia

Pneumonia

Together with the other symptoms
you have a peculiar flush of the
face somewhat dark red. Of all
inflammations in this you have
more of the blood increased the
most. In the beginning of the
attack you have the crepitant
ruchus which lasts only until
solidification takes place which
is indicated by dullness on percussion.
You have nothing but bronchial
expiration which is marked, when
the cells are not entirely involved
you have some crepitant ruchus still
remaining. At first you have bron-
chial expiration only soon after
inspiration also. This state of things
altered you have crepitation return-
ing modified called sub crepitant ruchus.

Mitchell

Pneumonia

Third Stage - patient seldom
recovers after this stage. Here
respiration more hurried, face
dirty yellowish &c. bronchus res-
piration absent without crepitation
returning - you have bronchial
ranchus or rattle. Sputa changed
to appearance of Pus prunice juice &c.

Pneumonia is most fatal when
it attacks top of lung, middle
lobe least fatal. When the brain
is much affected the danger is
great. Nervous debility bad sign.
When supervening to Measles or
small pox it is fatal unless
you are prompt in relieving the
case in the beginning.

Treatment. In the first stage
diminish action of heart and
reduce the fibrin of the blood

Mitchell

Pneumonia

For this reason you bleed boldly.
when this is followed by cerebral
irregularity, prolonged syncope feebleness
of heart's action cool skin &c
you must not repeat it generally
but may apply cups may use
dry cupping in such cases. But
must not confound a plebe case
with the one of extensive inflammation
of large portion of the lung which
causes prostration these cases are
relieved greatly by every bleeding
the repetition here will increase
the strength of the patient by re-
lieving the cause of the great
prostration. Next to bleeding
tart. Antimony ranks in this disease.
Calomel in large doses the best
in children also in bilious cases

Mitchell. Pneumonia

Calomel is also the best article after the first stage in all cases. Next in importance is Digitalis. You give Calomel in large doses in first stage in second stage small doses to stimulate the absorbents & diminish fibrin of blood add to Cal. *Op.* & *T. Ant.* or give Nitro powder. After the inflam. has been reduced to a great degree by bleeding &c. blisters are of great efficacy. Small blisters to extremities when brain is in any degree affected.

Third Stage you must stimulate give alcoholic Stimuli with Cinchona also Ammonia Combined with Opium Gum &c. As you reduce the fibrin diminished in this stage you give the Ammonia &c.

Mitchell

Pneumonia

Chlorine to increase it, bringing back some inflammation again & your patient will recover.

Adynamic Cases require stimulation internal & external and when you have raised patient's pulse by this means sufficiently you take a large quantity of blood, which you de gradually by this means you will bring the case to assume the common form of Pneumonia.

Typhoid Pneumonia give 20 to 40 grs. Trunk at a dose

Asthma

The Cause of Asthma ~~may~~ be depending upon a disorder in Circulatory, Nervous or Pulmonary systems, whatever may be the cause the spasm is produced

Mitchell

Asthma

by constriction of the muscles of the bronchia and other respiratory muscles. There is hardly any organ which sympathizes with the lungs when in a morbid state or irregular action may not bring on the paroxysm.

Symptoms. Physical signs - may have Emphysema or the opposite in lungs - resonance will be accordingly. In prolonged cases you have the former, in humid cases percussion will show little resonance at first.

Treatment - In the paroxysm must correct the irritation of the bronchial muscles by bloodletting & revellents or by an emetic which is highly beneficial and answers the purpose admirably. or

Mitchell

Asthma

to give Opium. In one case you
adopt one mode in another you
make use of another just as the
Case may seem to demand to gain
your object which is to allay the
irritation. Lobelia as an Emetic
a most excellent article. Opium
the best remedy in nervous cases.

A strong infusion of Coffee is
the best remedy in nocturnal
attacks, In hysterical affections.
Inhalation of ether is an excellent
remedy but as the attack is often
depending upon disease of the heart
it is dangerous to give ether.

Stramonium smoked in pipe.
Tobacco fresh ground coffee &c
a pinch of Benzoic acid smoked in
a pipe will relieve a paroxysm very
quickly.

Mitchell

Asthma

Nitrate paper burnt in the patient's room very effectual. After the paroxysm may give some expectorant. The dried root of Stramonium prepared in a dark place & kept in a sealed bottle and smoked between paroxysms will often prevent a recurrence.

Pleuritis

Treatment. The indications are to relieve the inflammation & fever by bleeding general and topical. The latter will generally suffice & is best to relieve the pain. Prevent effusion & adhesion. Give Cal. Sp & Opium. Digitalis after inflame. has somewhat succeeded. Effusion having taken place Iodine internally & externally. Or Cal. Sp & Digitalis. Three to six grs of Cal. &

Mitchell

Pleuritis

half to 1 gr. Squill & 10 to 12 gr. Digitalis
every two or three hours. This is the
treatment preferred by the Americans
At the early stage of the disease if
you bleed from arm bleed largely at
once & you prevent effusion. Small
bleedings increase the tendency to
effusion. Phlebotomy are generally
necessary if cupping has been ne-
glected. They are applied in latter
stage or after most acute stage
has abated, they will relieve the
pain, effusion, and restore tone
of muscles which have become
inactive, paralyzed. The Coloured
Indians bear bleeding badly
in all diseases. Paracentesis is
sometimes necessary - be sure to tap
where the water is. take small portion of
the effused serum & see what will be absorbed

Mitchell

Phthisis

Phthisis Pulmonalis

This disease is caused by any disorder which will pervert the functions of organs. Any thing which will awaken predisposing cause to action. Dr Mitchell thinks the disease is communicable from one person to another by close contact, as children or man & wife inhaling one another's breath. The most common cause is hereditary. The disease is divided into the periods of deposition, softening and excavation. Softening begins in centre of tubercle. The matter has much the appearance of pus. When the tubercles undergo the change the blood vessels both arterial & venous become obliterated

Mitchell

Phtisis

and new vessels are formed in the parts. When the tuberculous matter is evacuated the parts are occupied by cellular deposits & tortuous blood vessels forming an irregular mass in place of a cavity ^{in which circum-} ~~stances star up the patient sometimes recover.~~
~~in the patient may observe.~~

There is commonly a slight cough from the beginning of the deposition of the first tubercle, the cough may be periodical or otherwise, continuing all day the same. The sputa is transparent greyish or greenish tint. Tongue of a striated or feathery appearance in the centre. Spitting blood is almost without exception depending upon tubercles in a male subject. Other symptoms as pain or unusual sensibility

Mitchell

Phthisis

of the Chest (exterior) pain or
sawiness or tickling in large bronchus
 hectic, night sweats &c. may have
 hectic without a chill or without
sweat or without heat in particular
No other disease can produce tuber-
culosis but will accelerate its
development when the system is
predisposed to it. Puberty is the
worst period of life for consumption
Its age most favoured especially in
males. Women & youths are carried
off more rapidly & more surely than
men somewhat advanced in life.
Haemorrhage though profuse &
may be is not accompanied by
immediate danger but a sure
sign of Phthisis in men. Death
is sometimes sudden, from perfor-
ation of lungs or disease of heart.

Mitchell

Tuberculosis

You have a peculiar irregularity of
respiratory murmur, somewhat
interrupted, depending on deposits
upon the walls of bronchial tubes.
In health the murmur is continuous
& regular. Percussion, with these symp-
toms, will distinguish the disease.

Prognosis. - Always unfavorable.
Young women are sure to die with-
in two years from first appearance
of tubercles unless she is married.

Treatment - For the cough give
some expectorant as in Bronchitis
excepting the addition of Opium. For
night sweats many give an opiate
if admissible, or wash the surface
with solution of alum, but if you
check this you will have Diarrhoea.
For Diet give Nutric Acid or Quina

Mitchell.

Phthases

Counter irritation is of much service
to prevent recurrence of
 hectic or intermitting paroxysms
after having been relieved by some
preparation of Cinchona. Digitatis to
bring down the pulse. Three drops
three times a day is enough. The
same also for ~~eff~~ dropic effusions
the best remedy. To check sweating
which causes exhaustion wash
surface with saturated solution of
sulph. alum. in whiskey at bed
time. For diarrhoea which if it
occurs in beginning of disease is
owing to deposits of tubercles in the
bowels give tonics & astringents
also an opiate injection at bed time
and invite the circulation to the
surface by flying syngonisms which

Mitchell

Phthisis

When you change from place to place
obtaining a large extent of surface
to the salutificient action. This also
prevents night sweat to a great degree
Port wine & beef steak will improve a
case exceedingly temporarily bringing
the patient out again especially if
accompanied by exercise in the open
air on horse back the patient taking
at the same time vegetables if the
pulse is continuous. This will do a
great deal for Consumptives. A letter
inserted about the insertion of the
deltoid muscle consisting of a skin
disc which you remove thread
by thread very gradually to prevent
great a change by sudden healing
but this remedy is of questionable
benefit - you will adapt your

Mitchell

Phthisis

your articles to the case under-
standingly & you will do your patient
a great deal of good if you fail to
cure him. When the fibrin of the
blood is in excess you may do a
great amount of good by giving
Mercury. You treat this disease
as you do any other attending
to Symptoms. Poisons as bromine
are the best remedies in incipient
cases which must be continued
a long time in small doses
improving thereby rather than
disturbing digestion. Iodine
will bring on Haemorrhage and
is therefore not well adapted to
a disease which has a disposition
to haemorrhage from lungs. Cod-
liver oil an excellent cough

Mitchell

Asthma

Mixture & excellent article to be
company your other remedies, but
it alone will not cure the disease.
In Scrophulous cases where Iodine
is the great remedy this is the
best article you can give.

Change of Climate not recom-
mended by Dr. Mitchell. He
prefers exercise in good air pro-
tected by respirator, good horse
& good food not stimulating but
generous, good home & cheerful
company, which are not to be
had if patient travels abroad.

Pertussis,

Whooping Cough is sometimes
the cause of Asthma by producing
dilatation of the bronchia and emphy-
sema of the lungs. It is a contagious
disease depending upon a poison

Mitchell

Whooping Cough

entering the circulation & attacking
the organs as lungs, stomach, brain.
Symptoms. At first the same as a
common Catarrh & symptoms of an
irritation of Mucous membrane of
the stomach. Second stage the
nervous symptoms present them-
selves you have the whoop. In some
cases you have the brain much
affected, have blindness Convulsions
&c. You have paroxysms often pro-
voked by extrinsic causes as anger
or irritability in anything, overloading
stomach, in the decline they are
brought on in fact by such causes.
Complications with Pneumonia,
diarrhoea (oratory) eruptions like small
blisters, aphthae, are signs of great
danger in children.

Mitchell

Whooping Cough

Treatment. The patient having some disturbance of circulation & innervation in the beginning attacking the brain &c sometimes severely, first stage being febrile, under these circumstances if you have great determination to some organ open deplete by cups or leeches. You have great quantity of Mucus &c in stomach & bowels which if not thrown off is sure to affect the brain, you ought therefore give an Emetic if not contraindicated by the state of the brain. it may already be affected in such a manner as to forbid an Emetic. Give a large dose of Calomel, allay nervous irregularity & attend to stomach & bowels afterwards give Carb Soda Neutral Mixture &c as long as inflammation

Mitchell

Treatment. Pertussis

lasts treat antiphlogistically. In the second stage give Cox's hives Syrup if action is subdued sufficiently, give it in nauseating & emetic doses. If bronchitis is a manifest symptom, Muciparous glands much perverted upon give Cal. or Iodin. to change the state of the Mucous Membrane. Narcotics to allay the nervous disturbance which is a prominent feature in the disease. Do not omit their use. Antispasmodics are of much service. Where there is much pain, want of sleep or restlessness give Dr Han's remedy Sandanum. Allague & Hydrocyanic acid both very valuable medicines in this disease. Ether inhaled, Chloroform not inhaled 2 to 4 drops. Vaccination is

is Mitchell

Diseases of the Heart

May have hypertrophy, dilatation, atrophy, softening, or fatty matter deposited instead of muscular after the absorption constantly going on in all organs. Membranes may be affected by inflammation and you have deposits of lymph and other deposits.

The sounds of the heart - The blowing sound is caused by the contraction of aorta & regurgitation of blood through the valve when it is closed. The sound most distinct is about the upper part of the heart & the disease is at the aortal orifice. If you hear the sound most clearly about the apex & left side it proceeds from the mitral orifice. You may have bellows or blowing sound from change of blood as in chlorosis.

Mitchell Diseases of the Heart

Hypertrophy of the Heart -
May be centrifugal, dilating the
heart outward or centripetal dilating
it inward & diminishing the
the cavity - Apoplexy is often
the cause &c.

Symptoms - Healthy countenance
with hard unyielding pulse and
occasional pain in the region of
the heart. Increase of the solids
of the blood.

Treatment. Bleeding. Digitalis
Exercise. If this fails
a seton is an excellent remedy, if
this also fails Mercury - By these
measures you succeed generally.

Dilatation of the Heart -

You have a decrease of the solids of
the blood, action feeble, pulse compressible
Great noise of Heart's action owing to

Mitchell

Disease of the Heart

The change of the blood - a want
of red blood - Change precisely opposite
to the blood in a case of Hypertrophy.
the Treatment - You must change
the blood by the Chalcates and
animal food, Exercise in a carriage
or an easy horse but avoid all
violent exertion. Should not mount
a horse by the Styrup if it is too violent
a case. Gr. Digitalis 3 drops three
times a day together with your
Mineral Tonics. Examine patient
whenever every time you see him in
the recumbent posture in this way
you can discover any change
in heart's action - he ought to
be in this position several min-
utes before you examine him.

Saradacious deposits can
be halited - Give Digitalis or Rus. Acid

Mitchell

Disease of the Heart

Endocarditis

As in other inflammations you have the blood changed - have irregular action & pain about the heart, you hear the blowing sound if you lay your ear on patient's side - The blowing is not always a bellows sound. The heart may produce a friction sound in this disease.

Treatment - must be highly antiphlogistic immediately, bleed largely generally & locally & use Antimony & other Sedatives very low diet, perfect rest. This will generally cure, if it do not give Sedative doses of Calomel followed by Attenuants. If the Disease becomes Chronic use Digitalis, Hydracyanide &c.

Mitchell

Endocarditis

which article you should prepare yourself. Tonics become necessary. Spt. Turpentine is the best for reabsorption of coagulable lymph which you give with Spt. Nitre in combination of

Pericarditis

The pericardium being of the same tissue as the serous membranes of the joints is the reason that this disease is so often associated with rheumatism.

Symptoms - At first you may have friction sound from dryness of the membrane, also in the latter part of the disease when lymph has been deposited. After the dry stage you have Effusion

Mitchell

Puricarditis

filling up the sack which is
known by the dullness on per-
cussion over the region which
is much more spacious than
in health, and the stroke of apex
of the heart is not in the right
place - it striking through the
water changes its direction, by
this the disease is distinguished
from other affections of the heart.
Treatment - bleed, cups to the
spine as in rheumatism - is the
best remedy, sedatives as Opium
to remove the serum use Calomel
Squill & Digitalis as in other
effusions in chest - use fresh
Squill. you can keep the Squill
always fresh in a flower pot, you
as much Squill as the stomach will
bear, Digitalis sufficient to act as a

Mitchell

Pericarditis

is a native Cal. sufficient as an
alternative. this is the best. Iodine
not best. Yarrow where the
effusion is Symphons.

Rheumatism

This is an affection of the sero-
fibrous tissue, usually attacking
the joints: attended with pain
commonly & effusion into joint.
The inflammation is distinguished
by peculiar redness of the parts
affected, the large joints commonly
the seat of the disease but it is
translated from one part to another
which is peculiar to rheumatism.
Where you have a puffy swelling
of a joint, most tenacious, it is
synovial inflammation. The on-
set of the disease modifies your
treatment the measures for cure.

Mitchell

Rheumatism

Disease of the heart most common
accompanies this affection in per-
sons between the ages of 15 & 30.

Pathology - The essential seat
the point of rheumatic irritation
is the spine or Cerebro spinal axis.
It may be owing to a specific
cause as Syphilis in which
case the seat is not the ordinary
one of course.

Treatment - Should be directed
to the spine in most cases - if the
Rheumatism is owing to some specific
cause this treatment will not
do. Rheumatic inflammation
therefore being Sympathetic
your best plan is to apply cupping
to spine & Counterirritation to
some. at the same time give
Hydrogenic acid or digitalis a sedative

Altitudo
Physiologic Acid has proved very
successful in Dr. Mitchell's hands in
this disease and also in determining
the time in a patient to undergo
the necessary action

Diagnosis of the disease

Altitudo The liver being

a sluggish organ your aim must be to continue treatment of the disease every effort to be made to keep up the action of the liver and the liver cannot be kept in a healthy condition - Your aim is to keep the liver in a healthy condition it is for a long time. Your means are bleeding, to the liver, coffee loaf, Calomel, Altitudo, warm bath, Dinner in

Mitchell

Biliary Calculi

Treatment - Relieve the pain by inhalation of Ether. Warm bath to relax the duct through which the stone passes. May bleed in some cases. Ether is the great remedy, however.

Enlargement with induration of the liver producing dropsical effusions & haemorrhoids by obstruction in portal circulation.

Treatment - Mercury Iod. Potas. or Arsenic. Either of these will cure as cures depending upon this state of the liver. Your treatment must be chronic as the disease is so.

Abscess of the liver -

Is known by symptoms which are common in suppurations of the lungs &c. - If it points externally

Mitchell Abscess in liver
you open it by repeated applications
of caustic thereby making an open-
ing in this way you run no risk
of having pus extravasated as when
you open with the lance. You
treat the case otherwise as you
treat hectic, by small doses of
Quinia, Mineral acids &c. If
the abscess opens into the bowel
you have vomiting of pus &c.
or if it opens into the lungs
this discharge comes away by
cough &c.

Milk sickness - Trembles.

Caused by the food taken into
stomach possessing some poison-
ous property - is not owing to
miasma. Is not in water.
The disease is confined to the new

Mitchell

Trembles

Western States. Cultivation of the soil destroys the cause. The disease mostly prevails in August & September. Is said not to occur in Spring. Is destructive to Cattle and the disease is from them communicated to man through by means of the use of animal food, the cause operations on organs of digestion. Symptoms in man - peculiar fetor of breath, Constipation Vomiting, feeling of uneasiness trembling &c before vomiting commences.

The Attack - Nausea & vomiting which commonly last throughout the whole course of the disease, Enlargement of the abdomen, Aoughy full especially to the right of the umbilicus. Costiveness is difficult to overcome except by active measures. The disease usually runs its course in

Mitchell

Milk Sickness

about 10 days - Tongue is at first
furred &c. clears off during the course
of the disease & becomes red. Abdo-
men is often painful to the touch
right side especially. Stomach is
inflamed &c in fatal cases.

Treatment - Allay irritability of
the stomach, remove costiveness,
support strength - Cups leeches
&c to Epigastrium, alkalines - Dr.
Opium & Acet. Plum. ~~(No Emetics)~~
These for the stomach when inflamed
Emetics & Cathartics, Topical
bleeding in affections of the head,
Stimuli when patient begins to
sink (Vol. Alkali) perfect rest
& Calamities. No emetics
where stomach is inflamed.

Mitchell

Small Pox

Variola

Definition - An acute inflammatory contagious disease affecting on 3rd or 4th day the skin. The eruption pustular, pitting in centre scabbing and falling off about 3rd week - Varieties: "Distinct" in which each pustule is separate. "Confluent" pustules are coherent, "Semmi Confluent" pustules are in clusters. "Malignant" & "non malignant".
Stages - Incubation, Concoction, Eruption, Desquamation.

Incub. Stage - Irritability, whiteness of tongue &c, 7 to 14 days between this & febrile or eruptive stage which is ushered in by inflam. fever, pain in limbs & back, chill & flushes, lassitude, pain in back of head, irritability of stomach, nausea & vomiting. Sometimes very severe. Tongue at first white then brown. Bowels costive at first. Cerebral symptoms sometimes. Coma &c. Haemorrhage sometimes, on applying leeches especially, or any wound &c.

Mitchell

Small pox

A peculiar odour of breath & from exhalation
from the skin, it is very strong. On appearance of the
eruption febrile symptoms abate, which if violent
often prevent or retard the eruption. About $3\frac{1}{2}$
days after chill the eruption appears. (Papular
first appear in a circle drawn between chin & upper
lip of the nose, & within 2 days extend over the
whole body. In the mouth & fauces red spots may
be seen before the eruption.) Erythematous eruption
often precedes which if of a deep red, scarletina
type colour, you will have a grave & confluent form,
if of a rose colour you will have a slight case.
Sometimes there is intestinal disturbance. Thor-
acic also. From 3rd day depression in centre
of pustule may be remarked, increasing in depth,
occasionally by cuticle being adherent to parts beneath,
after adhesion being ruptured the pustule breaks & an odor-
ous colour evolves. Swelling of face enormous. Sometimes,
when severe complications are present suppurative
process is disturbed. Decline about 8th day of eruption

Mitchell

Small pox

a crust now begins to form; Area begin to disappear. Crust may become dark. 5th Stage Secondary fever which is owing to irritation in the bowels & keeps patient down. In children there is frequently an affection of the eyes. Sometimes Cerebral fever in children after falling off of scales.

The pustules are invariably smaller in the face than elsewhere. Period of greatest danger about the time of swelling of the face or when hands begin to swell which is a little later. The throat affected in a manner as in Typhoid fever & other parts diseased as in this disease. Sometimes, occurring about 6th day of the Eruption — Lungs indurated. Pleural diseased. Encephalon, Gastro intestinal membrane &c. Blood much changed.

Cause — Contagious.

Liability — ages of 15 to 25 as in Typhoid fever. Liability greatest, ^{modified} aided by change of circulation.
See End of book.

Dr. Mettler.

Inflammation

Products of inflammation -

Pus is broken down tissue or plasma arrested in its progress of formation into tissue - it is the exudation cell disorganized or dead mixed with serum.

Cicatrix - You must prevent contraction (in narrow cicatrix) by splints which must be applied for a long time but they must not be constantly applied, without intermission.

In the Operation for extensive adhesions you cut out the nodular tissue entirely & apply the anodizing process (water dressing) after the space is filled up with your flap.

Ulceration - a wound which has no disposition to heal

Dr. Mutter Products of Inflammation

Mortification. Traumatic Mortification proceeds from acute inflammation. Cold Mortification occurs in old people. Dry Mortification You have no effusion. Burned Mortif. you have swelling & effusion of serum. Potts Mortif. beginning in toe & generally in old persons. Hospital Gangrene. depending upon vitiated atmosphere. Specific gangrene, Constitutional Mortification arising from mental depression or Constitutional disease.

Treatment—Bleed & use anti-phlogistic means in Traumatic cases. Cold applications locally or apply blister extending above & over the part & some way up sound parts—this you do after bleeding & cold applications &c.

Dr Mutter

Mortification

In other varieties of Gangrene, not traumatic you apply Poultice & keep the limb clean. Give Opium &c. In most cases before amputating which is often necessary you wait for the line of demarcation which nature establishes. But in very rapid cases you cannot wait for the red line.

Wounds

First Cause of danger. Haemorrhage. Second Tetanus 3rd fever 4th Erysipelation inflammation 5th Hectic fever, Mortification, Metastatic abscess which may be in the limb, lung, liver. Stomach brain &c you have a change in wound, fever &c

Dr Mutter

Wounds

All simple wounds you ought
to treat by first intention.

Wounds of Arteries

A large artery being wounded,
where you have internal hemor-
rhage you want to have
the clots formed as quick as
possible to act as plugs to
the opening. You bring this about
by division from a
large orifice or two to produce
syncope, perfect rest of body
& mind, cool drinks &c.

Speciated Wounds.

If the limb is not too severely
crushed, have any pulsation in
it & patient's constitution is good
you can save the limb. If in-
flammation occurs you must
treat actively from beginning.

Matter

Wounds.

Otherwise sloughing will be the consequence as vitality in the part is below par. Prevent burrowing of pus by opening, and contact of pus with the neighboring parts as it is irritating. You can bore a hole through the splint which supports your dressing (warm water) apply a piece of sponge to the hole to catch the pus. If amputation is necessary wait until reaction has taken place.

Contused Wounds.

When an artery is opened by the projectile causing effusion (thrombus) apply cold to coagulate the blood to stop further effusion. The tumor will be absorbed if you apply compression & use antiphlogistics.

Mutter

Contused wounds

If inflammation takes place bleed patient & open the tumor & apply warm water dressing or a poultice. When the skin threatens to burst while bleeding still goes on puncture the tumor & draw off the blood, which you can do with your nose or suck it out. In cases of great nervous shock must use stimuli apply them per rectum where stomach has been hurt - must not give anything per stomach in such cases at all.

Punctured wounds

Do not cut out a needle from a joint, in other parts make your incision large enough to extract the foreign body. Nail in the sole of the foot &c.

Mutuer

Punctured Wound

apply lye poultice after the foreign body is removed. If your patient complains of chilliness & twitchings, in any of the foregoing wounds you must act very promptly & check Vitæ which is about setting in. Opiates are your chief remedies.

— Disease of Bones —

Ostitis.

Known from periostitis by the absence of all fluctuation. you have pain, increased by pressure & passing. Treat promptly by antiphlogistic battery. If suppuration take place apply a blister followed by poultice to scatter the suppuration, if this fails you open it. Trephining necessary in deep seated abscess. If you have

Mintie

Ostitis

Circumscribed pain you have
circumscribed abscess. This you
open. Chronic Cases you treat
by Counter irritation, Alterations
of which Iod. Potas. is the best.

Caries.

Ulceration of bone with Con-
stitutional disorder. If by ex-
amining the ulceration by probe
or finger you have acute pain
you have the inflammatory stage.
Pain diminishing & you have
supple like tumors externally
you have the second stage which
requires very different treatment
from the first.

Treatment - First stage, leech
es & Cold applications, rest and
Constitutional remedies as the
case may require.

Mutter

Caries

Treatment of second stage -
Constitutional, rest, Constitutional remedies Alteratives -
Cutting out the bone not generally necessary. Case becoming
involunt you must cut out
a piece of the bone or ampu-
tate. Make artificial joint
in cases of head of head of the
bone the diseased part, after
this is removed you will have
plasma effused & Cartilage formed
which you must prevent ossi-
fying by moving the limb.
In Superficial Caries you scrape
the diseased bone off as many
kill it by the actual Caustic
or Cauterizing Acid applied
sufficiently.

Mutter

Necrosis

Necrosis is not merely death of the bone but the phenomena which precede & succeed the death of bone. It takes place principally in the long or hard bones. Caused generally by inflammation. Anything which stops the integrity of the periosteum may cause it, but will not always as the nutrition of the bone may be supplied otherwise. There are three varieties - The external, the internal & the Complete.

Symptoms - inflammatory group of symptoms - You have osteitis, have swelling which speedily becomes soft, then you have opening with pus discharging -

Matter

Necrosis

Your probe will come in contact with a hard body; you have a wringing sound if you tap the bone with a sound.

In the internal or complete you have not the soft pulpy tumor. You have the ligamentous invaginated in the internal.

Formation of the Substitute

Bone - The periosteum being sound you have in the first place a degree of inflammation of this membrane by which plasma is thrown out and this is condensed into bone. If the periosteum is dead you may have the ends of the bone & surrounding soft parts throwing out plasma

Mutler

Necrosis

Since the periosteum is sound the pus will make the openings through which to escape, forming the Chloaca, in other cases they are owing to want of plasma in the part where they are established.

Prognosis— You ought to be guided in your opinion as to the prognosis.

Treatment. Attend to the Constitution in the first place. Give mercury, Iodine, Iron, as the Constitution may demand.

In the separation of the dead bone or formation of the new the Surgeon has very little to do.

Palliate the symptoms, Support your patient until the bone is loose then take it away immediately.

Mutter

Necrosis.

If necessary you must cut it out, which is often the case bone sequestrum which it may be the organization of the lymph.

In the internal it is necessary always to cut the opening larger which is done by the Saw (Curved or Bay's) cutting for exsicc then pull out the dead bone with forceps. After this you put the bone in Curved Splint as if it were a fracture and for as long a time.

Ossious Aneurism:

A pulsatile ossious tumor situated on heads of bone or soft bones.

Treatment - May tie arteries supplying it but amputation is necessary if this fails.

Mutler

Exostosis

Simple bony tumor. Divided into external & internal &c. The former is formed between the periosteum & bone cellular tissue interposed. The other is in the substance of the bone growing into the bone from the periosteum inwards. An other variety grows from the substance of the bone outward being both internal & external. The cause is a degree of inflammation.

Hydrated tumor. One cyst, throwing around it bone - inflammation precedes it.
Spina ventosa. A number of cells surrounded by bone.
Serous encysted tumor beginning as osteitis - often met with an

Mutter

Diseases of bones

Situated ~~about~~ the head of long bones, in the antrum as a consequence of Carious teeth. It is formed by fluid deposited in bone which has been softened by previous inflammation, or rather Ossous matter is thrown around the serum or fluid.

Treatment - You open the tumor & let out the fluid, if not large compression will relieve it, if very large you may have to amputate the limb.

Osteo Sarcoma

Osteo Sarcoma is the first stage of Medullary Sarcoma. Fungus Haematodes is the third stage of the same disease.

It usually occurs in the young.

Matter

Osteo Sarcoma

If you have a small tumor with gnawing, lancinating pain, rapid growth hard or irregularly hard surface you have the first stage of Medullary Sarcoma - You have cells with bony walls filled with fluid - Second stage you have no bone at all it being macerated or absorbed. This is followed by Ulcers -

Treatment - Must take away the diseased parts early or you can do nothing with the disease.

Wound of Bone

Def. - Solution of continuity with ^{of fibers} Condensation, & Contusion of fibers produced by action of cutting instrument. A characteristic of this injury is that the wound will

Matter

Wound of Bone

not close owing to Condensation
of the fibre & consequent Contusion
causing great liability to inflam-
mation both of the Bone & injured
Soft parts. Union will take
place by a clot of blood organ-
ized & ossified. - You must not
remove the clot in the wound
in thick bone. In flat bone
you have union membranous
not going on to ossification as
a general thing but may have
it & then are apt to have Com-
pression of the brain in avulsion
of the Cranium or Compression
of some other important organ.
Sponge away the clot in cut
through the skull use no
harsh means to remove it.

Mutter

Fracture

Fracture of Bone

Def. Simple solution of continuity. Suffering from wound of bone by having no condensation of fibre or contusion & consequent inflammation.

Caused - Muscular contraction, as in fracture of patella, forces directly applied, forces indirectly applied which is by counterstroke.

Divisions - Transverse, Oblique, Longitudinal or parallel, Greenstick a mere crack as across the skull, stellated as from a bullet head, id cane or slung shot, depressed, double depressed & comminuted.

Displacements - In length in diameter, in circumference one fragment rotating upon the other.

Matter

Fracture

Angular, as when both bones of the leg are broken & you put ~~the limb~~ not in a straight line you will have this from contraction of the muscles. impacted which occurs in tibia &c which is caused by the force applied to produce the fracture secondarily.

The causes of displacement are numerous, weight of the body may cause it weight of the limb, inattention of the surgeon to its position after dressing, Muscular contraction.

Symptoms. Pain, numbness, loss of voluntary motion except in impacted fracture, or where one bone only is fractured in arm or leg &c, you have a change in the form of the limb.

Mutua

Fracture

Symptoms continued - preternatural mobility except in impacted, change in the length of limb - most important of all is crepitation, but may have this without a fracture but not commonly. In luxation the limb is rigid have irregularity about the joint as unnatural depressions & elevations.

Bent bone occurs in children of from 2 to 6 years of age. Partial fracture in children somewhat older or may have it also in small children. In the former you have no crepitus in the latter you have in bringing the ends together. In obscure cases whether you have fracture near a joint or only sprain treat as fracture.

Mutter

Fracture &c

to avoid mistake & mischief
never make the mistake of treat-
ing fracture as a sprain.

Prognosis. The size of the bone
& muscles attached to it & the
sit of the fracture modify
the prognosis. If it is near a
joint or large cavity it is un-
favourable. The more oblique
the fracture the more unfavour-
able. Age, health &c have much
modifying influence. Pregnancy
no influence. Season of the year
owing to the patient being more
comfortable in winter than in
summer has much influence
in prognosis.

Process of Reunion —

First you have effusion of blood
for the first 12 or 14 hours

Mutter

Reunian

Four days after the fracture you have the effused blood & formed into plasma of the consistency of beated white of egg of pink colour a few days after this it is cartilaginous matter, a little later you have the puncta ossificat. a little later the ring & the pin the ring is not definitive but provisional callus which is all taken up but the pin continues to develop itself & permanently unites the fragments. If flat bones open have no provisional callus formed have the effused blood formed into membranes. Generally the bone is as strong after fracture is united as it was before, but if the fracture was through nutritious foramen

Wrist

The union of

the upper fragment will always be thin & brittle.

In fracture of the forearm the provisional splint is not taken up and after the third week if the treatment you must make rotary motion or this motion will be lost for ever.

Treatment - In taking a patient up immediately after the accident of fracture (you must not let him get up himself) you steady the limb by taking hold of it, you assistants raise him.

Extension & Counter extension is then made in the line of displacement not in line of the limb or you will not succeed in disengaging the fragments.

Mutter

Fractures

You have resistance to Coaptation by contraction of the muscles in which case you may give Aether or Chloroform or Opium if you have them not if this fails separate the locked fragments by cutting the muscular fibers which bind them together, if this fails you saw off the end of the lower fragment & straighten the limb in this case you will of course have shortening. —

Indications — First Position in which limb should be placed second, splints — For rollers use muslin which must be washed before you apply it —

Matter

Fracture

The collar ought to be in one piece without seams which will irritate. Bandage of Scultetus is very useful when the case will not admit of motion in dressing after first application of the collar or bandage but omit the center strip. In addition to position keep the patient on low diet for a day or two to avoid inflammation but avoid also bleeding if possible. When spasm occurs must allay it by Aether Chloroform or some other antispasmodic or narcotic or where they are inadmissible bleed ad deliquium. & then set the fracture. You may bring

Mutter

Fracture

the limb to its proper length if not by the first attempt you can on second or third day extending it by degrees. If blisters occur which they will sometimes open them with a needle.

In compound fracture if you soon set it out but prevent influx of air. If the patient gets up too soon you must protect the limb by a curved splint or the starched bandage. Stiffness of joints after fracture you overcome by passive motion & friction, but this you can all prevent by early motion of the joint.

In complicated fractures as fracture & luxation both

Mittler

Fracture

occurring at the same time
you protect the fracture with
splint & bandage & then reduce
the luxation afterwards you set
the fracture properly taking
care not to force joint out
of place again by avoiding
force applied to the joint.

You never employ the immo-
bile or starched dressing as the
first dressing but after callus
has been formed, after the sec-
ond week you may apply it
very usefully. In compound
fracture you try to close the
external wound as soon as
the bone has been set if you
can do it. The best mode of dress-
ing such a case is to take a

Matter

Fracture

piece of lint dipped in blood & applied, let it dry, then place the limb in a fracture box or other apparatus & varnish the wound over with Colodion and over that apply a cloth dipped in cold water. Where pus forms make a slit in the dressing & open the abscess. In these fractures the bran dressing is the best you will have to remove the bran often in hot weather which you do by scooping out part of it at a time & depositing new bran in its place little by little & so go on until the old bran has all been exchanged for new. The limb is thus kept undisturbed, unmoved.

Matter

Fracture

Irregular Callus, producing deformity either the fault of the Surgeon or the patient. In recent cases of not over 30 to 60 days duration you can relieve it easy enough. Where the function of the limb is not destroyed or much interfered with let the case alone.

Resection of bone, if the bone is large as the Os Femoris the prognosis is unfavourable. If the constitution is not healthy you must improve it before you apply your measures for relief. In hot weather you ought not undertake an operation, nor where the bone is unhealthy.

Well regulated compression in

Mittler

Fracture

Cases of recent deformity & soft callus as placing the limb in the trough of sheet iron with clamps & screws - will straighten it. Adhesions between radius & ulna if of not longer than a month's standing you can break up the intermediate callus by forcible pronation & supination. If it is of several months standing break the bones again, across your knee or back of a chair, padded. In old cases resection is necessary. In angular deformity you saw out a triangular plug. Overlapping deformity you take off the overlapping end, also freshen the end of the end of the other fragment, then

Matter

Fracture

treat as a compound fracture

In exuberant Callus or Callus
spreading out in spicules you
lay the part bare & nip of the
processes.

False joint

You have different varieties
of false joint, namely, that which
is owing to union by soft Cal-
lus, Union by Cartilage, Liga-
mentous union as in fracture of
the patella, Union by cellular
tissue occurring in old people,
perfect ball & socket joint when
bones are tipped with cartilage &
capsular ligament thrown around
the nature of the union may
be known by the symptoms &c.
peculiar to each - The first the

Mittler

False Joints

motion the more surely have you
the cellular tissue union. Ligaments
and you have in small bones con-
nected with joints, in this you
have not much motion. Cartil-
laginous, this variety occurs in
long & large bones, you have a good
deal of motion by strong efforts.
Ball & socket, the limb is enlarged.

Treatment - In all varieties
you want to excite new action
in the part to cause effusion of
plasma. A long time is necessary
to cure these cases. In recent
cases perfect rest will general-
ly answer, in older cases take
the fragments & by forcible ac-
tion rub the ends together by
which you break up the blood
vessels &c in the part.

Mutter

False Joint

Sometimes you succeed by an operation which presses the ends of bones together. These measures should all be tried in every case before you resort to other means. When they fail you introduce a seton, for thus you use strong tape which you can introduce in soft union. Ball & socket variety cannot introduce this. You must give the seton a fair trial, continue it for a long time. In ball & socket you cut down upon the ends & excite inflammation & treat afterwards as compound fracture. In ligamentous cut the tendon of muscle (The Quadriceps) & then you can bring the fragments together.

Mutter

Fractures

Fracture of bones of Nose.

Cause - Force directly applied.

Diagnosis is easy by an early examination, you will find by lateral pressure with your thumb & finger displacement, crepitus, bleeding of the nose, pain etc. May have compression & concussion of the brain. Where emphysema is present you have compound fracture, the Schneiderian membrane is ruptured & air is introduced. You may have dislocation of the cartilaginous extremity of the nose also.

Treatment is very simple, you plug the nostril until bleeding is arrested. Elevate the fragments with a bougie or quill & modelle the nose properly. Cold applications afterwards.

Mutter

Fracture

Fracture of the nose - In cases of emphysema you relieve the swelling by punctures & gentle pressure, in these cases the head will swell up enormously.

Fracture of Malar bone.

Displacement produced by the contraction of the Masseter muscle. You push up the bone apply a compress under it, apply a bandage to keep it there. The patient must live on soup - whether displacement is present or not.

Fracture of Superior Maxillary

Push up the fragments, keep the upper & lower jaws together by bandage - if teeth are wanting put pieces of cork in their places - must have the dental arches perfect -

Mutter

Fracture

Fracture of Inferior Maxillary

Multiple fractures are very difficult to treat from the contractions of muscles. In all cases of fracture of the lower jaw except its processes you have irregularity in the dental row. Your treatment in simple fracture of the body is the shirt or cap & the double sling bandage. In multiple fracture you must have the shirt long. Fracture of the Coronoid process you have an irregularity before the case when patient opens his mouth to gether with crepitus &c. You apply cylindrical compress behind the lower fragments and the double sling bandage

Mouth

Fracture

In multiple fracture of the lower jaw where the dental row is much disarranged you bring the teeth into line with loops of silk. In compound fractures with haemorrhage apply a plug of lint to arrest the haemorrhage.

Displacement of the vomer in fractures of the nose wrap your forceps with tape & bring the fragments into place.

Fracture of Os Hyoides.

Symptoms. Sense of choking difficulty of swallowing &c. pass your finger into the glottis and press upon root of the tongue. When you cannot reduce the fracture this way insert a tenaculum & draw the bone out.

Mutter

Fracture of Hyoid

and off the tube with which it
interferes & endangers the patient's
life. Effusion is apt to take place
from which there is danger of Choking

Thyroid Cartilage when

ossified may be fractured. You
mould the fragments as in a
fracture of Os Hyoid. & treat
antiphlogistically. Where stran-
gulation is impending you
open the wind pipe before you
reduce the fracture.

Fracture of Sternum

Overlapping fracture the most
common. You set it by
pressing upon the overlapping
fragment. When the displac-
ment is downward apply the
album on both sides at a sufficient
distance from the intercostal

arteries make cut down & Counter
excursion. Afterwards broad bandage
usual Antiphlogistically. You may
have to cut down & elevate in some
cases as in Fracture of the Skull
Longitudinal Fracture is known
by crepitus if you make pressure
by finger - lowel bandage &
antiphlogistics &c. is your
treatment.

Fracture of Ribs.

Symptoms - Acute pain on in-
spiration &c in all cases. & Crepita
Cough &c. May have Emphysema
& Erysipema. may have dangerous
complications of various kinds,
if a patient spits blood lung
is wounded.

Treatment - Simple cases bleed

Matter Fracture of Rib
Opium at night, Broad bandage
ast. Other cases must be treated
ed as the case may require.
Same as fracture of Sternum
When you have internal haemorrhage
or shags treat as gunshot wound
or other cases of internal haemorrhage
Emphysema puncture the skin
press out the air & apply your
bandage. Laceration of the
intercostal artery after internal
haemorrhage has been arrested
may compress the artery by
pushing your handkerchief into
the cavity of the chest forming
a pouch then fill the pouch
with cotton & by pulling the cloth
you compress the artery effectually
keep this compression three days then
remove the cotton with forceps &c.

Mutter

Fracture

Fracture of the Clavicle

If force is directly applied the nerves & arteries are generally compressed & injured, you have numbness &c of the arm. Deformity may occur but not necessarily if properly treated. If the sternal portion of the bone remains stationary the external is dragged down by the weight of the arm. You may have displacement downwards, inwards or forwards. In partial fracture examination with your fingers will inform you of the nature of the injury.

Treatment - Apply Hoy's dressing or Mayes's both are modifications of Desault's -

Mutter

Fracture

Fracture of Acromion

This process will be dragged down by the deltoid or at least by the portion of the muscle attached to the acromion.

Symptoms - A tumor & a depression, lengthening of the arm.

Prognosis is unfavorable, you are apt to have inflammation of the joint, and ligamentous union as you cannot bring the bones together.

Treatment - A pad between the elbow & Thorax instead of the axilla, push up the fragment & keep it up with a broad adhesive strap, and otherwise the same bandages &c as for fracture of clavicle.

Mittler

Fracture

Fracture of the Inferior Angle
of the Scapula - Displacement
not a necessary consequence.

Treatment - Wide bandage
across the thorax when there
is no displacement - This
is also the dressing for fracture
of the body of the Scapula. When
there is displacement in either
you push up the fragment &
apply a compress in front &
roller across the breast.

Fracture Coracoid Process -

Cause - Force directly applied,
Contraction of pectoral, Coraco-
brachialis & short head of Biceps
muscles.

Symptoms - Preternatural Promin-
ence of inferior part of the axilla ~~and~~
discolor not present

Mutter

Fracture

Treatment of fracture Coraco
process - Compress under the
shoulder which you apply as
the patient grasps the opposite
side & apply bandages.

Fracture Spine of Scapula

Fracture close to Acromion,

In simple you have no dis-
placement - Known by pass-
ing your finger along the spine
of the bone. You apply the
roller across the breast to
keep the scapula pressed to the
side.

Fracture Direct Scapula

By force directly applied
Symptoms - Flattening of the
shoulder, lengthening of the arm
tumor in the axilla. Prominence
of the acromion.

Mutter

Fracture

the symptoms are much like those of luxation of shoulder. You distinguish by being able to adjust the fragment to its place with great ease, reduction of luxation being more difficult. You have also crepitus. Treatment - Short sling to keep the arm up, adhesive strap to keep fragments adjacent, pad under the arm not in the axilla but a little lower down.

Fracture Head Humerus

By force directly applied. If it is much cracked you have pain increased by motion. Loss of motion of the limb. Diagnosis is difficult. Must treat all injuries of the shoulder

Matter

Fracture

as fracture of the head of the H.
if you are not sure of the nature
of the injury. Which is best, &
as you have spongy bone & are
apt to have inflammation use
antiphlogistics.

Impacted fracture of the head of
Humerus. You have the hum-
der fuller, arm shorter, no sup-
puration. Prognosis is unfavourable
must not attempt disengagement
of the fragments.

Comminuted fracture of the
head of Humerus. Prognosis
unfavourable, you will have in-
terstitial ~~absorption~~ deposits &
impaired motion afterwards
passive motion will however
prevent it very generally.

Matter

Fracture

Compound fracture of the head
of the humerus. If entirely in
fragments you take away the
pieces & apply curved Splint.
never amputate if Constitution
of patient is good, you will
have ligamentous union.

In all these cases you want
a sling to hold the arm, Cross
bandage to hold the arm to the
chest, a cap for the shoulder
of paste board. About the 10th
day make passive motion or
you will have stiff joint this
to be attended to every day. You
close the External wound, If
pus forms you let it out.

Fracture of Anatomical neck
Same pretty much in symptoms &
management

Mutter

Fracture

Fracture Surgical Neck Humerus

Force directly applied or by muscular contraction. Lower fragment is carried inward. The symptoms are the same as in luxation except you have crepitation when the fragments are brought in apposition. You apply angular splint padded at the upper extremity for the lower surface pad sufficient to keep the fragment out, and when the internal condyle rests the splint must be padded also. You wrap three other splints. Keep this on for five weeks. at the end of 10 days you must make passive motion of the joint.

Mutter

Fracture

Fracture of Humerus below Surgical Neck between the neck & the insertion of the deltoid. Here you must invert your pad, instead of the base upward you have it down. Otherwise dress same as the preceding case - Long angular splint. &c.

Separation of Epiphyses.

You have the arm slightly shortened, just below the olecranon process you have a round tumor but a flattening between the two, no distinct crepitus but a creaking sound, this with the age of the boy - 10 y. will aid diagnosis.

Treat as fracture of the neck of the humerus as you would obscure injuries about shoulder.

Mutler

Fracture

Separation of greater tuberosity
of Humerus.

Symptoms - greater breadth
of shoulder, loss of voluntary motion,
but motion by surgeon
interfered with, by passing your
fingers along the bone you will
find the separation.

Fracture Humerus about
the middle - Treatment the
same as fracture of neck except
the pad not of wedge shape
after three or four weeks may
substitute curved splint, it is
more comfortable.

Fracture just above Condyle.
Symptoms - Fore arm shortened
tumor just behind joint, same as
you have in luxation of both bones
of the fore arm, except when

Matter

Fracture

You make extension & Counter extension & pressure you cause disappearance of deformity in fracture, have also crepitus, whereas in luxation you have neither.

Treatment - Two Angular Splints
~~The Splint in front, short, long~~
ends of splints to forearm -
about the third week begin
passive motion. Your rectangular
splints must be made
with a joint so that the
angle may be changed at pleasure.
Also apply short splint
in front of arm & another on
the back.

Fracture of Condyles

Force directly applied, may have
one or both fractured if both you have

Matter

Fractures

the olecranon forced between the two condyles which you can disengage by strong extension & counter extension.

Treatment - First roller, two angular splints, keep hand firm after the first week passive motion, but lateral pressure must be continuous, 8 weeks are necessary to get well.

Fracture Forearm.

Radius is most generally the bone broken. In all cases where both bones are fractured the diagnosis is easy. Where one only is fractured you will find the seat of the injury by pressing upon the spot & rotating motion while you hold the upper end of the forearm firm.

Mutter

Fracture

Treatment. Two splints padded
as to compress interosseous space,
interpose pad between the knuck-
les & other projections of the splint
the splints should be long so as
project beyond at both ends.
About the second week must
make rotatory motions or you
will have this motion destroyed,
also passive motions of joint.

Fracture of Radius

This is very common from the
connection of the bone with the
hand. Fracture of Head - you
have pain in the joint, immobility,
swelling, crepitation on rotating the
lower fragment. After some days
standing it is hard to distinguish
from sprain. Treat all obscure injuries
as fracture - angular splint, passive motion

Fracture neck of Radius

Symptoms - Irregular swelling at upper part of the radius, Crepitation when you bring the fragments together.

Treatment - Give padding, splint, arm is not to be put across the chest by a sling.

Fracture of Shaft of Radius.

Treatment same as that for fracture of both bones.

Barton's fracture

Splitting of the head of the Radius produced by a stroke upon the heel or back of the hand in an oblique direction. You will have the Capital now drawn between the two fragments.

Treatment - Disengage the Capital now by extension & counterextension.

Mutter

Fracture

and pressure. Make natural motion of the joint before you apply the splint - Apply compresses in the natural depressions first the one above filling the depression & then the under one the compress for this to be a little forward of the other over them you apply your splint.

Fracture Olecranon

Caused by a fall on the elbow or contraction of the triceps musc. You have the displacement very great except fracture is not complete or is longitudinal. You have no rupture of the capsular ligament. Complete fracture you have lump above, loss of motion, pain &c. will have fibro cartilaginous union.

Matter

Fracture

The joint will always be weak afterwards as there will not be sufficient nutrition for bony union, you have excessive secretion of synovia separating the fragments & crushing away the effused blood, no cellular tissue being present to hold it & the contraction of the muscles cannot be overcome by any apparatus.

Treatment - extend the limb apply roller from the hand up to the articulation then take hold of the upper fragment & bring it down the wrinkling of the skin consequent upon pulling down fragment must be removed by assistants pulling skin up, then secure the fragment with the roller which you then carry up the arm to paralyze

Mutter

Fracture

the triceps. Then fill up the front part of the joint with cotton wadding & apply splint. At first you carry the arm obliquely across to the chest after a few days may let it hang down. At the end of the second week take off the straight splint & apply one with a joint to enable you to make passive motion but you must not bring limb to flexion to at once, do it gradually from day to day until you get it completely flexed.

Fracture Coronoid process

You have a tumor above the joint, depression over the joint, by contraction of the Brachialis int. Treatment - a semi angular splint, fix the arm so as to bring the hand

Matter

Fracture

to the Shoulder otherwise the treatment is the same as for the foregoing. Your splint must have a compound joint so that you can make passive motion at the proper time without removing the splint.

Fracture Carpal bones

Symptoms - Crepitus & the appearance of the parts will inform you of the nature of the injury. Apply Strait splint. This is all that is necessary after you have made the parts.

Compound Fracture Carpal bones

Treatment - Covered splint & the irrigating process for a week to prevent inflammation after that warm or cold water dressing passive motion at proper time. Must pick away sequestrae of bones before you dress.

Mutter

Fracture

Fracture Metacarpal bones.

Displacement backwards apply compress upon back of the hand & strap splint under the hand. Displacement forward apply ball of cotton in hollow of hand &c.

Fracture of Fingers

Dress with thickening plaster = bandage both for first & second collars. two splints.

Fracture of Thumb

Apply upon splint on the back of the thumb.

Fracture Thigh bone

(Within the capsular ligament)

Occurs in old people particularly females because the angle of the thigh is more acute. A very slight cause is sufficient to produce it.

Mutter

Fracture

You have shortening except in un-
fractured fracture. This fracture
in old persons say 70 y. of age
where no ossific union can be
expected all you have to do is
to make patient comfortable.

Bed made as in all such cases
Apply double inclined plane
for two weeks, then get the
patient by degrees to sit over
the edge of the bed. At the end of
about 7 weeks get him on
crutches & high heeled boot.

In younger persons you treat
the case as you do fracture
of the shaft as you may have
ossific union.

Fracture Thigh - upper third

You treat as fracture about center
except addition of band across the

Matter

Fracture

upper part of the thigh to overcome contraction of the iliacus and psoas magnus muscles.

Fracture Thigh - about the centre
May be produced by force direct
by applied or by muscular contrac-
tion. Upon have shortening by the
lower fragment being drawn up
& inwardly by adductor & hamstring.
Prognosis - rather unfavourable.

Treatment. In the first place
must attend to the bed on which
the patient is to lie. ~~and~~ must
have a bearer - a simple frame
with sheet stretched over it, on
which patient immediately lays on
have Van Wick's bedstead

Position - Inclined plane objectionable
because pelvis is movable & extension

Fracture Thigh

cannot be made regular nor can you make accurate measurements and you are apt to have ankylosis from long continued fixed position. All these are serious objections to the use of the inclined plane as a first dressing but after the sixth week you may submit it to advantages.

Your best dressing is Desault's apparatus modified by Phipps and Hutchison. You may want short splints also in front & back of thigh to prevent tilting of the fragments. You want Dr Coates extending band which is made by stitching buck skin on muslin strap. If excoriation takes place from this must use the garter also lined with buck skin.

Matter

Fracture thigh

Of this also excoriates use straps
of sticking plaster laid along the
leg & brought into a loop at the sole
of the foot, until excoriation is
relieved. You want Counter extend-
ing band round & soft. transverse
band common handkerchief straps,
Splint cloth, which is to be two yds.
long & one yd wide in which the
splints are rolled & brought together
in shape of a trough. All these articles
must be procured first. You then
lay patient down upon the op-
erators - first apply the extending
band & Counter extending band &
transverse band which is put
across the pelvis to fix long splint.
Make extension & Counter extension
until you have limb as long as you
can get it at the first dressing.

Mutler

Fracture thigh

then tie the extending band to
block of Hutchinson, the perineum
or counterextending band through
holes in the long splint. Splints
having been brought against the
limb the straps are tied to keep
the splints adjusted, to keep up
lateral compression. Slip the
short splints under the straps
Must get the limb to its prop-
er length if not at the first
wrapping at the second or third.
Protect the heel from excor-
iating by adhesive straps or
cushion with hole in the center.
after fourth week must make
passive motion in every joint.
protect limb against bed clothes
with proper apparatus made with
hooks &c.

Wrist

Fracture

after the sixth week may change the position of the limb by putting it on inclined plane or in starched bandage. Did your patient, no bleeding if you can avoid it, no purging.

Fracture of the leg, both bones
Treatment - Fracture box, the foot piece high enough to protect the limb against the weight of the bed clothes, the base of the box long enough to extend beyond the knee joint. You put a pillow in the box over which you lay oiled silk. Strips of bandages to bring the side splints of the box together to produce natural compression. Apply extending band and pad of cotton to the sole of the foot to protect it against the ad

Muttler

Fracture

There will be extension kept up by the band. May take this apparatus off at the end of the 2nd week & substitute the starched bandage which must be continued for six weeks. In Oblique Fractures where the box may not answer the purpose you apply the dressing for fracture of the thigh.

Compound Fracture Leg.

Extension & Counterextension in the line of displacement when bones protrude &c. if you cannot disengage them saw them off. Afterwards put it in fracture box with the bran dressing. Watch the case, if pus forms leave it out by incision.

Matter

Disease of Joints

Most liable to disease those joints which are most exposed - those covered only with cellular and fibrous tissue.

Synovitis

The most common cause is Rheumatism. You have absorption of the head of bones. Gout is also a common cause but instead of absorption you have deposits of Carb. lime. Gonorrhoea is also a common constitutional cause. You are very apt to have this when the discharge is suddenly arrested. Parturition also a cause. Metastasis must be treated by bringing back the discharge (the irritation in the part) from which the translocation took place.

Mutler

Synovitis

You have acute pain redness following, heat & Swelling. You may have displacement of bones & cartilage about the joint.

Prognosis is unfavorable, if the cause is constitutional it is more favorable.

Treatment - Remove the cause except where you have a muscle or other foreign body of the kind run into the joint when you would have to cut too much. Most important indication is keep the part at rest put it into a carved splint, keep the part, give Colchicum which you can get good at Shephard's St. upon which you can rely - general antiphlogistic course.

Matter

Synovitis

As the inflammation becomes chronic apply counter irritants, prevent Ankylosis.

The results may be - Ankylosis, Synovitis articularis. in the latter case apply compression, rest, give Withering's infusion of Digitalis. Cupping every few days or blister where you cannot cup which is most effectual. In Chronic Cases you might open the sack by tapping subject Loline but it is too dangerous a practice.

Another result of inflammation of a joint is Abscess. It is known by the general symptoms of Abscess. Don't open it. Apply compression, rest, Loline. Don't. If compression increases the pain

Another
 view of your
 part of & I think the above
 when it is not otherwise
 proper treatment. Another
 result of suppression of
 is relaxation & distinction of
 elements which is necessary
 by the signs in the form -
 it is owing to a great influence
 from your will and in applying the
 through knowledge to the point and
 practice to the high reaching by
 the application the same from
 much. In consequence of
 where you find the natural
 his part his legs will double
 up. No harm. Apply at the
 out lateral to joint by a hand
 out and your feet will get along
 very well but cannot be done.

The cases which are owing to recent inflammation - not congenital - will be cured by the above treatment - the following is the mode of applying the dressing - tie handkerchiefs above & below the knee joint and strips from one to the other & tie them together, imitating lateral ligament. This test is important in treatment.

Loose Cartilage in joints

Most common in jinglimous, hips & knees. These bodies are generally attached by a pedicle, so soon as this pedicle is broken you can make out the diagnosis, not before. It is probably formed by synovial inflammation & deposits of lymph following which is changed into cartilage. If smooth body is easily removed. -

Mutter

Loose Cartilage

The symptoms of loose cartilage in a joint are, sudden arrest of motions of the joint accompanied by severe pain, like a sprain.

By working the joint you can bring it to one side & can feel it.

Treatment - Compression getting the Cartilage out of the joint if you can slip it out & applying a well knice cap or tight roller this is the best treatment, but an operation may be necessary, if the patient is incapacitated by the Cartilage & can not relieve him by the above treatment you remove it by an incision after you have brought it to one side. Subcutaneous Operation made by incision through the

Matter

Diseases of Joints

Incise high above the joint & dissecting down to the Capsule, slip the body along the canal you have made, be careful you let no air into the joint. The joint must be kept at rest. Danger of this operation is dangerous.

Neuralgia of Joints

Met with in small boarding schools. You have intermittent pain in the joint. No swelling nor heat. Pain is increased by a slight touch as much so as if you shock the limb. Your patient is pale. Digestive apparatus is impaired.

Treatment — Give nutritious diet a little brandy at dinner. Iron &c. at first blue pill. Shower bath the best local application

Matter

Diseases of joints

Malignant Tumors about the joint. You must amputate above the articulation, early.

Wounds of Joints

Prognosis unfavourable where the joint is opened especially if lacerated.

Treatment - When the wound does not penetrate into the joint close it with stitches. Cold wet dressing, rest. Lacerated wound

if the knee cap is shot off &c. bring a flap from the sides of the joint from both sides and stitch the two flaps together.

Foreign bodies must be removed if it can be done without difficulty.

Mutter

Sprains

You may have laceration of ligaments or not in sprain.

Symptoms - Fainting is almost a characteristic symptom. Singson can make the natural motions of the joint but patient cannot. Swelling is uniform & fluctuates and fluctuation from beginning.

Swelling coming on gradually. In laceration the swelling is irregular after the swelling has gone on for sometime you cannot distinguish sprain from other injuries but in all these cases you treat as fracture.

Treatment. Cold evaporating lotions or warm fomentations if cold increases the pain. Give anodyne to relieve nervous irritation of the patient & the pain elevate the limb. this will suffice in simple case

Mutler

Sprains

In bad cases you must leech the part & use active Antiphlogistics for a few days, afterwards apply a roller dipped in lead water to act as Compression &c. After some time later Counter irritation to relieve stiffness if it comes on hot Douche the best with passive motion & frictions.

Luxation

Cause - predisposing cause preternatural length of ligaments about the joint, paralysis of Muscles about the joint. Dislocation of the joint preceding spontaneous luxation, Laceration of the ligamentous system is the most common. Age has much influence in directing nature of injuries

Mutter

Luxations

Immediate Cause - Force applied to the joint.

Consecutive luxations must be first reduced to the primary before you can reduce the head of the bone.

After the third week you ought not attempt generally not attempt reduction as you lacerate the adhesions formed.

Prognosis - Depends upon the joint involved, extent & direction of the displacement &c., Length of time displacement has lasted also modifies it. Changes in parts. You must not attempt reduction in cases where adhesions & absorption are extensive, this you have in strong healthy patients, not so in relaxed constitutions.

Muttler

Luxations

Reduce the luxation immediately where patient is faint - this condition will aid you - But where he has received nervous shock as where an artery is wounded you must attend to that in the first place.

Your force extension & counter extension must be regular and equal and made in the line of displacement.

Dislocation of Hip -

Your extension is to be made from the leg - adhesions existing & resisting the reduction must be broken up by rotation &c. - ligaments holding head of the bone in displacement must be cut - You must disengage the head of the bone from any obstructions which may resist reduction.

Mutter

Luxations

the lip of the acetabulum, &c.

In some dislocations you will expect ligamentous union as in all luxations of Clavicle when you will have a weak joint ever after & have some deformity generally.

Luxation Thigh - up & back-wards upon the dorsum Ilii. You want perineal band on sound side, transverse band, both in the hands of assistants. Pulley adjusted & assistant at that. the extending band to be each jack towel applied with wet roller, to this pulley is adjusted. Your assistants being ready you take up hold of the thigh & make the rolling movements until you find the head coming to the lip of acetabulum

Mattler

Luxations

When you tell the man at the pulley
to let go and you bring the limb
out. Place patient on his back.

Head of thigh bone forwards
as Pubis. The same bands for
Counter extension & Pullies as for
the above.

Head of bone into Foramen Ovale
You make no Extension - you
give a fulcrum also a transverse
band to fix the pelvis. Loop of
towel for fulcrum - Assistant
pulls upon the loop & you
bring the limb across the other
thigh - keep heel next to the bed
as possible or you will have the
head lodged in the Ischiatic notch.

This if it happens is reduced by -
First turn patient on his side

Mutter

Luxations

then apply your bands &c Counter extending, lifting & band to fix the pelvis, pullies Counter extending band on the sound side again. you take hold of the lifting band & lift the head of the bone out of the notch & let it slip into the acetabulum by contraction of the muscles, the man at the pulleys ~~suddenly~~ ^{relaxing him} go his extension as you lift the head out.

Luxation of Patella - (Lateral), on either side - Flex the thigh on the pelvis & leg on thigh to Quadriceps Fem. m. then with your thumb you press the patella over, afterwards you pull the Patella down & apply bandage as in fracture of this bone to get the tendon united short as possible

Lux. Patella - Downward -

Treatment the same as foregoing.

Lux. Patel. on its axis -

Treatment - Relax Quadriceps M.
then press with the head of a key (which
must be well wrapped with strip of
muslin or cloth) on the lower edge
and with your thumb on the op-
posite side & upper edge - If this
fails you must divide the tendon.

Lux. Knee joint

Treatment - Always make ex-
tension in the line of displacement
until you have the bones separated
then change the direction of your
forces of exten. & Counter extension
afterwards put the limb in splint
to guard against inflammation.

You may have partial luxation
beside up., down., & lat. lux.

Matter

Suxations

Sux. Cartilage Knee joint. -

Here you have internal derangement of the joint, No External peculiarities.

Treatment - Set patient on a table, let the limb dangle, then flex it & by a little tact you bring the Cartilages in place.

Suxation Tibula.

You have the head of the bone thrown to the side of its facet. You have unnatural protuberances & depressions where neither should exist.

Treatment - Flex thigh bring head of the bone in place, then apply bandage from foot up to pelvis.

Suxation Ankle joint,

Inwards ~~or~~ Outward - Flex leg upon thigh, Exten. & Counter Exten. Lateral pressure then put in Curved splint to avoid inflammation.

Lux. ankle joint - upward & downward - Extension & Counterextension in the line of displacement & pressure.

All other luxations of the foot are treated by ~~Extension~~ Extension & Counterextension & pressure. if these fail you must take out the displaced bone.

Wounds of the Abdomen.

Superficial wounds, not penetrating the peritoneum - You want sutures which must not be put through the muscles or you will have all symptoms of Strangulated Hernia. Over your sutures apply strips of sticking plaster instead of a roller - prevents inflammation, prevents an improper

Matter

Wounds Abdomen

you must bleed &c instead of them.
If Suppuration takes place which is
common you must open early to
prevent peritonitis becoming in-
volved.

Lacerated Superficial Wounds of the
Abdomen as from a splint, after
other dressing apply warm poultice
unless patient is a strong healthy man.

Contused wounds of Abdomen
will be apt to be followed by
wasting of muscles which are
involved & you will have ventral
Hernia

Penetrating Wounds of Abdomen.

Simple wounds you close exten-
sionally, prevent inflammation by anti-
septics, avoid fusing. First
of all that may be necessary

Mutter

Penetrating Wounds Abdomen

You arrest internal haemorrhage by position, bleeding, Digitalis &c prevent action of the bowels by the use of Opium from the beginning (after haemorrhage has ceased) —

Penetrating Wound with Protrusion —

Wash the protruded Omentum with warm water before you put it back, let it protrude into the lip of wound, close the skin over it.

If the Omentum is wounded and bleeds you tie the bleeding arteries & cut off the ends of ligatures.

If you have Mortification of Omentum you must not cut it off nor put it back until the diseased part sloughs off, then push back but must put a stitch through it & the skin to prevent it retracting.

Matter

Penetrating W. Abdomen

Protruding intestine put back by returning that portion first which has escaped last. If both Omentum & intestine protrude put back the intestine first. Intestine looking black you may have only venous congestion which you distinguish from mortification by pressing it when it will change colour but will regain same colour immediately after you finger is off — this you put back — if it is mortified leave it hang out & form artificial anus.

Intestine wounded, you stitch it up but your stitches must not go through the coats of the bowel. Intestine entirely divided you make artificial anus by attaching the bowel to the skin.

Matter.

Wounds Abdomen

Never put back a bleeding, a dry or a mortified viscus -
Never grope for a wounded intestine &c.

Wounds of Stomach

Produced by a blow upon the stomach when filled. You will have vomiting of contents of stomach & blood. Excessive agony, rapid distention of abdomen, great prostration.

In Concussion of the Solar plexus you have none of these symptoms except the extreme prostration. In an open wound you have an escape of the contents of stom. also prostration. In the first case - laceration if of any extent prognosis very grave. Can only palliate symptoms - must die.

Dr. Matter Wounds of Stomach

The Open wound is not so unfavorable but is very dangerous also. You must stop the Hemorrhage by tying the vessels which bleed, dilate the External wound & bring the edges of the wound in the Stomach together by stitches through the Muscular Coat only by over stitches or Continued Suture. Attend to all ~~extraneous~~ symptoms that may turn up - inflammatory require bleeding (copious) Give no drink, patient may have ice in his mouth. He must be nourished by injections & baths of soup &c. If the wound in the Stomach is from a stab & it is not easily to be found - trust to nature & keep down inflam.

Dr. Mutter

Wound Intestine

Wound by a blow producing
laceration of the intestine —

You have great agony, distention
of abdomen, great prostration &
evacuations mixed with blood

Treatment — Keep bowels at
rest, keep down inflammation
Give large Opiate injections or
inhalation of Chloroform to pro-
duce rest of the bowels — The
patient may recover but
generally dies.

Puncture as from a
dagger &c. — Your principle
symptoms are an escape of
sulphuretted hydrogen from the
external opening & subsequently
bloody stools together with the
foregoing symptoms of wounded
bowel.

Dr Mutter

Punctured W. Bowel

Treatment - If faeces escape from the wound put the patient in such a position that they may escape readily from the wound - give large dose Opium. Fomentations to the wound. Nourish the patient with jelly twenty or 30 drops at a time - May give Chloroform instead of Opium. Never dilate the opening unless the wound is large. If the puncture in the bowel is small let it alone it will unite of itself. In wounds of more than four lines in extent pucker up the wound & apply ligature & cut off its ends leaving the knot behind. If you have a cut introduce a thread along the edge

Mutler

Wounds Bowels

of the wound on both sides of the cut, through the Muscular Coat only, encircling the wound, you then take a probe & invert the edges of the wound. and tighten your ligature. Keep down inflammation.

Intestine entirely Cut Through

Bring the wound to the wall of the abdomen to form an artificial anus. Or stitch the ends together through the Muscular Coat.

Wound of the Liver - From a blow. You have prostration from internal hemorrhage which you cannot treat as in wounds of less solid organs. You cannot bleed for it. relief. Ipecac soon. Opium. Sanguis.

Watter

Wounds of Head

Where you cannot protect the brain by natural scalp, as where a piece of skull has been removed, you bring parts of the scalp on the sides over it by a kind of plastic operation. In these wounds you have protrusions generally - If the protrusion is of a purplish hue cut it off & apply pledget of lint dipped in cold lime water if it is Brain must not cut it off - apply the same to harden it.

Fracture of the Skull -

Temporal fossae, Base of Parietal bone, Orbital plate, are the parts generally fractured from their great liability, being weaker.

Muttler

Fracture Scalp

Fracture of the base - You have haemorrhage from the ear also a discharge of serum, and you have symptoms of compression of the brain coming on rapidly, or inflammation of the brain. The discharge from the ear is not positively indicative of fracture unless you have the other symptoms also.

Emphysema of the scalp indicates fracture through the frontal sinus.

Depression - in young children, under ten years of age you have no fracture - you have the bone sunk without it being fractured by the force applied. May have symptoms of compression.

Mutter

Injuries of Head

Treatment of depressed fracture -
If you have ~~depressed~~ compression
you trephine where an external
wound you do ~~so~~ whether com-
pression is present or not

Fracture of the base you do
not trephine - your treatment
consists of Mercury Cold & anti-
phlogistics. Salivate if you
can. Fracture through the
frontal sinuses you have great
swelling, Emphysema, you
treat it antiphlogistically &c.
but if you have also depression,
both tables fractured you must
trephine which you do with
two trephines one for the outer
table which must be larger than
the one for the inner.

Mutter

Injuries of Skull

Concussion of the Brain —

In these cases you have Oscillation; Separation; or laceration of membranes, from their ~~the~~ attachments.

In the first you have vomiting & symptoms of stunning merely. Where you have separation vomiting is not present have contraction of the pupils, Coma, symptoms of prostration. Where you have still greater prostration involuntary discharges of faeces, Convulsions & you have laceration.

Treatment — In the first bring about reaction by position &c afterwards watch patient & keep down inflammation

Matter

Injuries of Head

In the second, where you have separation of Membrane, you bring on reaction by internal & external stimulation, afterwards watch patient you will be apt to have inflammation.

In the third you stimulate with hot applications externally hot brandy & water internally and afterwards watch patient & keep down inflammation.

Depression of Bone of the skull (without fracture in children) You ward off inflammation by cold applications, purging, dieting, and bleeding if necessary. The elasticity of the bone will not admit of it remaining depressed long - Trephining is not practiced in these cases.

Compression of the Brain

Symptoms — Stupor from which the patient cannot be aroused, slow labouring pulse, stertor in breathing, dilatation or contraction of pupil, paralysis of sphincters, paralysis of other parts of the body.

Cause — Suppressed fracture, effused blood after an injury which will not be immediately after the injury has been received but hours & days afterwards. If it comes on 10 or 12 days after the injury with no symptoms of suppuration it is Serum Effused.

If rigor & puerile convulsions you have effusion of Pus.

Matter

Injuries of Head

Wound of the Scalp.

In wounds of the scalp where inflammation takes place there is danger of having the brain involved, causing effusion of serum or plasma and producing compression.

Lacerated wounds - the scalp torn in pieces - you wash out the dirt &c. & bring the shreds in place & keep them together with strips of adhesive plaster and apply cold water - no stitches.

Contused Wounds are more dangerous than lacerated. Avoid if possible cutting through scalp, remove the hair & apply cold & if things do not get worse let the case alone with this. If inflammation goes on apply leeches

Matter Injuries of Scalp
and other Antiphlogistics - If these
measures fail & it is going on to
suppuration lay the wound open
early.

After receiving a blow on
the head and the patient in
two or three days afterwards become
irritable, morose &c you have
an inflammation of the Dura
Mater or Membranes of Brain.

If you have a puffy or tender
spot on the scalp your diagnosis
is yet more sure.

If convulsions take place which
will be the case after a little while
you trephine at once - Before that
you may succeed with antiphlogistic
shaving the head & applying Cold &c
Mercury.

Mutter

Injuries Abdom. viscera

Laceration of the Spleen (Thorn a blow)

Symptoms - prostration, cutting pain, the location of the pain will prove the seat of this injury.

It will prove fatal.

Wound of the Spleen (Thorn stab, &c)

Symptoms - You will have a full continuous stream of black blood from the wound. You have a protrusion of the organ in an extensive wound.

Prognosis is more favourable than in the foregoing injury.

Treatment as in wound of the liver except use acetate of lead. May have to give stimuli. In the second case (protrusion) you dilate the orifice bring the Spleen to external orifice fix it with a thread, plug puncture with lint dipt in some styptic.

Matter

Wound large Artery

When a large artery is wounded you thrust your finger down & compress it and direct an assistant to cut down & ligate the artery. You cannot take your fingers off until this is done

In Contused wound of the Abdomen, as from a kick &c if you have bloody emesis there is laceration, otherwise you have only concussion of the solar plexus - You must in the first place stimulate until reaction takes place then guard against inflammation by antiphlogistics, but if this take place you are apt to have suppuration (an Abscess) in this case you make a free opening as soon as it is formed which is known by Chill & Throbbing.

If an abdominal tumor remains stationary is not malignant nor aneurismal, leave it alone.

Ovarian Tumor

If your patient is in good health let the tumor alone - If you have a fluctuating tumor, health impaired tap it, if this will not save the patient you may remove the tumor. Take out the tumor if prostration occurs.

Whenever an operation is necessary make a large incision.

Gastrostomy.

This operation is not to be performed except to remove foreign bodies which can be felt through the walls of the stomach, and where a foreign

Mittler

Injuries of the Abdomen

body interferes with the functions of the alimentary canal as in invagination of the bowels and never in any case but when you can feel the lump - It is one of the most dangerous operations in surgery, but is the only chance to save the patient's life in some cases.

Effusions in the Abdominal Cavity of Blood. You dilate the wound & tie the bleeding artery. If you cannot do this close the external wound and let the blood coagulate - You will have peritonitis which you treat antiphlogistically. If swelling &c take place the edges of the wound becoming patulous you have softening &c of the Coagula, Suppuration &c

Matter Injuries of viscera

You let out this matter by opening the wound again. You must not close the wound when the gall bladder is wounded. When juices escape from a wound you cannot close it.

Urinary Effusion - From wounded bladder - You introduce the catheter and leave it in the urethra, or open the perineum as in Sythotomy to let the urine escape.

Urinary Diseases.

Retention of urine -

Cause. - In old people it may be caused by paralysis which is the most common cause.

Mutler

Urinary Diseases

Retention of urine is also caused by irritation in the neck of the bladder, by Spasm, moral causes, Enlargement of the prostate gland and other mechanical causes.

When it occurs in the female it is generally owing to moral cause. It may be intermittent, gradual or sudden.

Symptoms — You have great pain, swelling &c You must not be deceived by the dribbling of urine which may be present.

If it occurs after an exposure to cold & the patient gets it often it is owing to Spasm. If it occurs in the young it is owing to Stricture, In old it is probably owing to enlargement of the prostate

Mutter Urinary Disorders

Prognosis — favourable unless it is owing to enlargement of the prostate, chronic irritation &c. These cases you can only palliate.

Treatment — If it is spasmodic warm bath & Chloroform or Ether will relieve it. Opium in the rectum, bleeding, Catheter if necessary. As to structure you introduce the Catheter to the seat of the structure & pass the Dilators one after the other they being of different sizes, this way forming an opening sufficiently large to pass the Catheter — This you do in recent cases. In old cases you may have enlargement of the prostate which you can feel through the rectum. Or you may have disease of the neck of the bladder

Matter

Urinary Diseases

Tapping the bladder is often necessary - You get the elastic Catheter capped with the silver cap use it first without the wire, if unsuccessful use it with the wire, if you cannot succeed with the ordinary curve of the instrument try a greater curve. If you still fail tap the bladder, which you do by cutting through the perineum if necessary from the laceration of the perineum. If the prostate is at fault cut through at the pubis or the rectum - the former you introduce the curved trocar between the pubis & the peritonium which you can do if the bladder is filled - Same instrument for rectum.

Dr. Mutter

Urinary Diseases

Intermittent Retention of urine
Occurring at intervals of two or
three days or so. You must
give Quinine or some other ac-
ticle of the kind.

Where a man is exceedingly
prone to retention it is owing
to irritation about the neck
of the bladder. You cure it
by Caustic bougie.

When it is owing to paralysis
electricity is the best remedy.

Where it depends upon the
state of the urine you cure it
by changing the quality of the urine.

When it depends upon spasm
give large quantity of Opium
& let the patient rest.

Dr. Mutter Urinary Diseases

Incontinence of Urine

occurs in very young & very old. Sometimes it is the result of habit. Examine the urine if it is alkaline or too strongly acid correct it. If it is owing to habit put a blister on the Sacrum to make the patient sleep on his abdomen give also a dose of Opium in the evening, allow no drinks in the evening.

When it is owing to paralysis in the old you can do little or nothing for it.

Urinary Calculi

There are predisposing causes. The male is more predisposed than the female. The difference in the

Mutua Diseases of urinary organs
urethra makes it worse for the
male than the female.

The disease is not common in
the negro. — It occurs in tem-
perate climates not apt to occur
in the extreme north or south.
You therefore send your patient
away from home if he is pre-
disposed to calculi.

It is not common in the
middle aged. Dyspeptics have
deposits of uric acid and are apt
to have stone from this cause.
Chronic inflammation of the
bladder causing deposits of Mucus
may lay the foundation for stone.
Any body in the bladder may
serve as a nucleus for the forma-
tion of a stone. Paralysis of the B.
preventing the urine passing off &c. &c.

Mutter

Diseases of Urinary Organs.

Stone in the Kidney

Symptoms — Severe pain in the region of the Kidney. Followed by fever, You have muddy turbid urine, in a few days the stone comes down into the ureter blocking up the passage & creating very severe pain and preventing further discharges of mucus, pus &c from that kidney the urine therefore becomes changed getting clear — this is the main point in distinguishing the disease — It is fatal.

Smaller Calculi, Sand, will cause great pain, prostration, retraction of the testes — this with the history will distinguish it from Cholic, Hemia &c

Mutter Diseases of Urinary Org.

You relieve the patient by relaxing the ureter, for which you use the hot bath, Bleeding, Opium, Turpentine & Camellia - the Opium & Turpentine together.

Stone in the Bladder.

Symptoms - First, frequent desire to make water, next muddy urine, sense of some foreign body in the bladder, sudden arrest of the stream in making water, peculiar sensation at the glans penis. But you cannot be certain of a stone being in the bladder until you discover it by sounding. You have also bloody urine after exercise. You should not sound the bladder before preparing the patient

Matter

Stone in the Bladder

by warm bath, purge, flaxseed tea with a little nitre.

Your sounds should have different curves, short & shorter - get a silver catheter with a stop-cock by which you fill the bladder with some bland fluid, then by forcing the fluid out of the bladder the stone may roll against the instrument, thus you may often detect a stone while other modes of examining will fail - You have a peculiar metallic sound communicated to the ear when the stone strikes the instrument. Use different instruments change the patient's position until you detect the stone. When the metallic sound

Matter

Stone in the Bladder

is absent you may you may have a tumor instead of stone in the bladder.

Prognosis — In old ^{cases} people it is unfavorable — The lining membrane of the bladder being in a diseased state — thickened, contracted.

Treatment — Look to the urine test it with litmus paper, if it changes its colour to red it is acid, if blue it is alkaline — the two requiring very different treatment. You can relieve the symptoms by the use of acids or alkalis as the case may require. You must relieve the symptoms of irritation of the organ by these means before you operate.

Small Calculi you can remove with proper instrument

Matter

Stone in the Bladder

First preparing the urethra, relaxing it by the use of warm bath, belladonna rubbed over the parts to dilate it. In all cases of lodgement of a Calculus in the urethra when you cannot remove it with instruments adapted to the case, cut through the urethra & take it away, then pass the catheter into the bladder & leave it there for a few days.

For Encrusted Stone You introduce the double canula and pass diluted nitric acid in one & let it pass out by the other - to act as solvent.

Operation of Sytectomy You want The Staff, knife, forceps, tenaculum, Physics needle for Haemorrh., Syringe.

Mutler Stone in the Bladder
Lithotomy.

Dangers accompanying the operation — They are inflammation, Abscess, Haemorrhage, improper conduct of the patient, all these may cause the death of the patient. The Mortality is 1 in 8.

You must always watch the patient after the operation on account of Haemorrhage which may kill him although you should have no Haem. immediately after the operation.

Fistulas occurring after an operation lay open the Perineum, — Small fistulae Cauterize.

If you wound the rectum close the wound immediately after you are through with the operation. Stitch it.

Matter

Lithotomy

High Operation - Between the two pyramidal. Abdom. muscles cut down between the Pubis & the peritoneum which you push up out of the way.

You must put a sound in the bladder through the urethra with a stilet in it. After you have made the external incision you feel for the point of the sound & push the stilet through, then dilate the wound sufficiently. The High operation is only performed in enlargement of the prostate or where the stone is too large for the other operations - too large to go through the arch of the Pubes &c.

Mutter

Lithotomy.

The Bilateral operation - May be performed if you prefer it but the lateral is just as good except when the stone is large it may have some advantage over the lateral.

The Rectovesical operation

This is performed with the curved trochar as for tapping the bladder in the usual manner. After you have passed the trochar you remove the stitch & pass the curved bistoury along the canula and cut down through the prostate.

This operation should not be practiced fistula will follow it.

Lipsectomy - operation of Lee - a new operation which Dr. Mutter thinks is not a good one & does not recommend it.

Müller

Lithotripsy.

This operation is not to be performed when you have ~~any~~ prostate, irritable urethra, stricture &c. But where you have a healthy person, sound urethra, stone not hard &c. bladder not diseased, it is the best operation.

In Female Children you divide the urethra to remove stone by Lithotomy - After the age of ten years your patient must not be cut for stone Lithotripsy is your operation here.

Hæmorrhoids

Piles are divided into blind & open pile also into external and internal.

Cause - Disorder of the alimentary or digestive apparatus -

Matter

Hæmorrhoids

The portal system, the liver at fault.

the portal circulation is impeded.

These things must be corrected before you can cure the piles.

Females, especially of the higher classes are most subject to piles.

Symptoms - The intellect is impaired irritable temper in cases of long standing - there is a sensation of fullness about the anus if large & the sphincters internal & external relaxed. You should examine with the speculum in cases when the pile is not to be seen otherwise, Do much for blind piles.

Open or Bleeding pile -

In the Bleeding piles the Constitution will give way much sooner than in the blind. This is a serious disease

Matter

Hæmorrhoids.

and will kill your patient. Except where the individual has been subject to determination of blood to the brain or hæmorrhage from the lungs in these diatheses it is not to be interfered with.

Treatment - If the pile is strangulated you must return it. if it is inflamed you must relieve the inflammation - You must always relieve the patient before you leave him.

You have the hard fibrous, the erectile (from irritation of the mucous membrane), the dilated vein, the rupture of vein & exusion of blood in cellular tissue - form varicosis - they require different treatment therefore adapt your remedies to the case -

Mutler

Hæmorrhoids

Open the bowels, avoid straining. Patient should always go to stool in the evening and lay down afterwards & be quiet, get digestion in order. Cold injections, give a pill of pitch 30 grs. or more or Balsam or Wards paste.

In bleeding piles use injections of Kreosote water, tannin & other astringents. If the patient bleeds bad do not tamper with the case.

Bloody tumor, of the appearance of a shot - you lance it - other cases you do not lance.

Protruding piles - You first palliate the symptoms by leeches fomentations &c. Then oil your finger & reduce them - press in the central

Mutter

Hæmorrhoids

tumor first - You do this after the inflammation has been reduced.

The external Hard pile - You cut the tumor off, first passing a ligature through its base to keep it down, if it bleeds apply the Caustic.

A pile, if you can press the tumor away it is dilated or Exc. tile pile, this you must not cut off. You pull it down with your hook & apply Caustic making an Eschar round it first you strangle it & then apply your Caustic.

To strangle a pile if it is covered with skin you must first cut through the skin, so as not to strangle the skin.

Mutter

Hernia

Strangulated Hernias

The strangulation is owing to swelling of the protruded bowel &c or contraction of the ring.

Treatment - Taxis - This is not to be made use of where the tumor is painful, is red &c. - Here you must first bleed, apply cold, injections &c. In applying taxis you must be careful not to push back the sack with the bowel as you will have the strangulation still present - If this has happened you must bring the tumor down again this may be done by efforts of the patient by coughing &c or if this fails you cut down & bring it back. Taxis must not be made too forcibly - If you fail reducing the

Matter

Hernia.

Just by having the patient in the usual & proper position (Patient on his back with the muscles relaxed) you bring the muscles upon the stretch & you may succeed this way.

You must let out the flatus from the bowel if it is present. Relax the patient by bleeding Chloroform.

A heavy dose of Opium when nothing else will succeed will often be successful.

If you must operate you may in recent cases perform the operation of Sack which is done without opening the Sack. But when the bowel may be mortified it is not to be made use of.

To operate you want the following instruments

Matter

Strangulated Hernia

A Scalpel, Groove director, probe pointed bistoury, tenaculum, forceps, ligatures. - wrap your bistoury with a strip of muslin or something else up close to the point.

Your dressing after an operation is to consist of a stitch or two a piece of lint dipped in cold water, antiphlogistic treatment, a dose of Opium to allay irritation. No purging in less than a week after the operation. bowels must be set at rest with Opium.

The operation must be performed immediately if you do not succeed by taxis.

Oblique Inguinal Hernia -

If by making taxis the tumor passes up rapidly & you have a grunting sound, the tumor elastic, you

Matter

Oblique Inguinal hernia

have bowel alone - When you have the spine you have momentum alone - You distinguish it from Varicocele by these circumstances.

You have in hernia no tumor after it has been returned & you keep your finger upon the ring while the patient gets up - In the other you have the tumor returning and the sensation communicated to your finger when examining it is as if the tumor consisted of worms in a wet bladder

Distinguished from direct Inguinal Hernia by the Canal being oblique instead of direct.

In Operating where you find the adhesions of the sack so firm that you cannot separate them

Matter

Hernia

with your finger you cut off part of the sack & let both be returned together.

Concealed Inguinal Hernia -

The tumor is not protruding through the external ring and you have therefore to cut through the external oblique muscle in your operation instead of the fascia communis or you cannot reach the stricture.

Direct Hernia - Requiring a small block to fit the ring no larger than the end of your thumb.

Congenital Inguinal Hernia - You have no investing membrane except in cases where the ring is closed at the time of birth which is not a common circumstance.

Matter

Desmia.

In operating in this cavity, you divide the structure outside of the sack, if you can, if not you open it at its most dependent part to prevent inflammation extending up the peritoneum into the abdomen.

Syphilis.

Cause - Impure intercourse or contact between the sexes.

The period of incubation - If matter is directly applied it is almost immediate, if applied upon the healthy skin or hardened & suppurated it may take several weeks to infect - it varies from an hour to 4 days & to 5 or six weeks.

When gonorrhoea & Syphilis are both produced at the same time

Mutual

Syphilis

the respective virus of both have been in operation, one cannot produce the other

Chancre - The primary symptom. Either simple pustule, deep seated inflammation or abrasion. If the chancre is seated in the mucous tissue you have a red granulated surface, like the strawberry. When you have it in the integument - ^{integument} ~~thinly~~ abraded - the surface is yellow, if decent it is smooth, not granular, shining, yellow or greenish. In deep seated you have a pimple with a hard base sloughing and forming an abscess, you have the edges inverted unless the ulcer is phagedenic, indurated, the edge is rather turned in; You will

Matter

Syphilis

always have the system contain-
inated. In Phagedena you will
have no secondary symptoms it
always destroys the specific ap-
pearance of the ulcer & is not fol-
lowed by secondary Syphilis.

Up to the 4th day or 5th day
the matter of a chancre will not
reproduce the disease, thus seve-
red from a healing granular ul-
cer will not reproduce it. But
after the first period and previ-
ous to healing even when it has
existed for years it will infect.

If you suspect your patient of
telling you a falsehood about an
ulcer having the appearance of
chancre you inoculate him.
You cannot positively say whether
it is Chancre or not without it.

Matter

Syphilis

Prognosis — An ulcer with a hardened base you cannot cure in less than from 4 to 8 weeks & you will have secondary symptoms also. You are very apt to have secondary symptoms in abating ulcer also. Phagedenic you cure sooner but it depends upon the time necessary to get the constitution of the patient healthy.

Treatment — Where you have no inflammation & the patient is a healthy man cauterize the chancre. If this is done in the first period you will have no secondary symptoms and will cure the patient in a few days — mercury here is not necessary. If inflammation is present you will

Mutter

Chancre

Produce Phagedena by apply-
ing nitrat silver - You bleed &
purge & apply Cold water until
the inflammation is reduced &
then you may apply any thing
you please. Wherever you
have a hardened base Mercury
is necessary, give it cautiously
so as not to salivate. Where
you have an indolent ulcer
apply Stimulating articles.

In Phagedena Mercury is
inadmissible, apply Carrot wa-
ter solution of Gun Cotton (Col-
lodion) painted over it. if
Constitution is reduced, weak,
give wine, Iron Iodine &c. If
it persists in spreading apply the
Iodine over it. If it bleeds it
will soon get well. Where the

Matter

Syphilis

patient has fever you bleed &c.

Secondary Disease is not communicable by inoculation but is by transmission from parent to child.

The protiodide of Mercury is the best article to prevent the Secondary disease - You give it in all cases of the Hunterian Chancre - if you cannot give Mercury internally use it by inoculation or fumigation - After the disappearance of the Chancre you still use Mercury & continue it for a time - as long as it took to cure the Chancre. Inoculation should be used in every case of Hunterian Chancre together with the internal use of the Mercury.

Mutter

Syphilis

Bubo is a secondary disease its appearance showing that the virus has entered the system. May have it where no ulcer has been formed.

Bubo is not always recognized if more than one gland is affected. - if only one is affected & is situated above Poupart's ligament it is a specific Bubo.

You open the tumor as soon as it is formed & treat it as you would a common ulcer and it will soon heal, but where it has advanced to sloughing it cannot be cured so easy - in the very first stage you treat it antiphlogistically, if the bubo will not disappear you apply

Mutter

Syphilis

a blister which will hasten sup-
puration or cause its absorption.
if you have fluctuation instead
instead of this, open it, instead of
applying leeches blisters or iodine
ointments. After opening if it will
not heal by stimulating application
you give mercury as in chancre
unless the patient becomes pros-
trated here you give Sod. Potas
which will bring up the man
at once raising the pulse &c and
the ulcer heals - you must give
the patient good food also.

When you have Phagedena, dough-
ing &c you change the blood by
good diet, Porter, Sod. Potas and
apply Cold water dressing, no
stimulating applications will answer.

Mutler

Syphilis

When you have indolent ulceration, when you have indolent granulations, instead of no granulations at all as in Phagedena, you apply your stimulating washes lay open the sinuses & at the same time use internal remedies. Mercury when the patient has not the mercurial erythema or is debilitated, when this is the case you give Iodopotas. — The inflammatory stage treat antiphlogistically, The indolent hard tumor by stimulating applications & exercise of the patient. The fluctuating lay open at once. The Phagedenic requires generous diet & tonics &c.

Matter

Syphilis

Condylomatous Tumor.

In Children it is soft around the genital organs. In infants you treat it by warm bath inunctions and give mother internal medicines - Cut off the tumor occasionally & give stimulating washes. Occurring in the Adult they are hard - Treated by similar remedies locally and give Constitutional Medicines.

Affections of the Skin (Following Syphilis) - They may be upon any part of the skin - May be little red specks, may be blotches, scar, or disseminated scaly - all these may be converted into lupia which are ulcerations of different

Matter

Syphilitic ulcers &c.

appearance pustular &c - The
pustular which has the appearance
of small pox &c is more difficult
to cure than the scaly - The pus-
tules are small & hard in the first
stage. The circumscribed flat sca-
ly eruption is called Ecthyma, there is
another called Squamous, Tubercu-
lar another which is a hard tumor
under the skin, inflaming & open-
ing the appearance is of Copper colour.
Another variety is the Lupinus
disease the scales of which are
connected by cicatrices.

Treatment - In all cases some-
times addressed to the skin - necessarily
begin with bath, followed by Sul-
phur vapour bath which is to
be accompanied by Constitutional

Matter Secondary Syphilis

Remedies. In vigorous Constitution
give Mercury & vegetable diet.
In debilitated Iod. potas. &c
good diet, wine &c.

Syphilitic Sore Throat.

When you have no ulceration
it is the most simple form.

In other cases you have the
tonsil affected & the ulcer spread-
ing to surrounding parts. Another
variety Phagedenic - The
bone may become affected
from all varieties

Treatment - In the simplest form
apply Nix. Silver in sol. 40 gr. to ℥j ℥r.
Give Protiod Muc. when the system
will bear it if not give Iodine &
tonics - Diet regulate.

In the second variety apply

Mutter

Secondary Syphilis

you have excavating ulcerations
Apply solid Nit. Silver except
where the edges are hard & sensitive
here you apply soothing remedies
Gums &c also Gargles of bark &c
repeated blisters to the throat.
Give Mercury or Iodine as
the case may require.

Phagedenic ulceration you
stop the sloughing by wash of
Nitric Acid or Fr. Iodine. apply
blister, active tonic treatment.

Glandular Diseases (Depend-
ing upon Syphilitic taint of the
Constitution) of the throat or
groin. Use the Sulphur
vapour bath, apply at first
Mercurial Ointment change
to lead & to Iodine Plaster if
suppuration takes place open it.

Mutter

Secondary Syph.

Give Iodin or Mercury - the disease is hard to get rid of.

Syphilitic Iritis.

Symptoms - Black pupil becomes red, a light pupil becomes greenish, there is pain &c. in a day or two there is effusion of Plasma - May have the pupil irregular in shape or contracted.

Treatment - Take blood from the part, apply Ext. Belladonna around the eye, Blister behind the ear, mercurial inunction mercury internally - You must salivate the patient in all cases of this affection -

The iritis follows in about two weeks after Syphilis.

Mutler

Secondary Syphilis

Syphilitic affection Hair bulb.

The Hair becomes loose falls off. Cut the Hair short and make use of tonic treatment.

Sulphur vapour bath &c.

If all other remedies fail in these affections (The foregoing) try decoction of Litmon it will often cure where all other remedies fail.

Syphilitic Tongue

The tongue is swollen inflamed, ulcerated. Apply Nit. Solv. & give Constitutional remedies it comes on weeks & months after the primary disease.

Venereal Warts -

They follow Syphilis or Gonorrhoea - You cure them by

Mutler

Secondary Syphilis

Cutting them off with scissors.
after bleeding stops apply nit. silv.
You may have the whole prepared
& covered with these excrescences
Strong Nitric acid wash ap-
plied repeatedly will cure it.

Syphilitic Rheumatism.

It follows the primary disease
from several weeks to 12 to 18
months after the disease has
been relieved. You have nodes
on some bones. Other symptoms
are the same as ordinary Rheu-
matism.

Treatment - You must use the
sweating plan. At first give
 Dover powder at night & use Sod.
Potas & warm bath for six months.
If this will not cure it sweating is the
only plan that can succeed.

Mutler Secondary Syphilis

Knobs.

In the first stage the lump is hard, in the second it is soft, in the third it ulcerates —

Treatment — In the first stage

Give Iod. Potas. & apply a blister

In the second stage blister also

~~a~~ Iodine ointment. Do not open

it as a general thing. If swell-

ing increases rapidly & softness

also open it by the subcutaneous

incision this will relieve the

pain immediately — it is not

pus but serum that fills the

tumor. Give Iod Potas in all

cases. Ulcerations cured by Iod.

Potas. tonic treatment & dress

the wound simply — pick out

the loose bones. —

Mutler

Amputation

Primary Amputation -

This is practiced after a severe injury of a limb, as by railroad accident, gun shot wound. Is performed as soon as reaction has taken place & before fever sets in.

Amputation is frequently followed by Local, Constitutional & Metastatic affections —

Cystitis is a very common occurrence, inflammation of the veins about the stump also in which you have a burning pain in the stomach & shooting pain from the stump up —

In both these affections prompt antiphlogistic measures are necessary. in the latter you

Mutler Amputation
apply a blister to the stump as
in ~~Mutler~~ Anginolucitis. Me-
tastatic abscess in the brain &
may also occur - if in the brain
you make use of Counter irrita-
tion, apply Cold to the head and
give mercury. but it is generally
fatal - The abscess in the
lung or liver apply cups, bleed,
Counter irritation, Mercury for
liver, for the lung no Mercury,
lay open the stump.

Gangrene attaching the
stump take the patient into
another atmosphere - if it is
depending upon a Constitutional
~~to the~~ Cause you wait for the
red line of demarkation and
~~amputate~~ again. If it
x - as white swelling &c

Mutilation Amputation
depends upon traumatic cause
wait not but amputate im-
mediately higher up.

Excessive Suppuration which
you have in amputations for
hectic you check by applica-
tions of astringents as lead water
&c. Poultice of ~~white~~ oak bark
if you have nothing else. this
is an excellent application - Give
tonics &c.

The Constitution is modified
by amputation, becoming
plethoric &c. You must hab-
ituate it to the modifying
influence by seton or issue,
in the back of the neck where
the head is affected, Change
the patient's diet &c.

Matter

Amputation

You may have introduction
of air in veins, especially in
amputating at the shoulder,
which filling the right Auricle
of the heart will be fatal if
not removed. Convulsions are
the immediate effect. In
such a case you must exhaust
the air by syringe introduced
in patulous orifice of the
vein,

Nuxvomica in Impotence & Sperm
orrhaea. By M. Duclou.

75 grs. of the alcoholic ext. of N. Vom.
made into 100 pills. of which give
the first five days one every night,
then for 5 days 1 in the morning & 1
at night, then other 5 days 2 morning
& 2 night. Other 5 days 2 morning & 3
night and so on till 4 are taken
morning & night. You may
also rub the following liniment in
the loins & inside of the thighs —

R. Trac. Nux. Vom. Trac. Arnicæ
vel Melissa a-a 60 parts Tr. Lyttæ
15 parts. Regimen tonic. Moderate
of Coitus.

Serpentine Collyrium, or ointment
for eyes, excellent.

Medical Clinic.

Nov. 3rd 1849. By Dr. Mitchell

Case 1st Nervous Affection Epileptic
and Cataplectic, attacks every two
weeks alternating first Epileptic &
then Cataplectic fit. In these cases
a 'point of attack' is observable, by
applying your treatment to such
point you break in upon the chain
of symptoms & break up the disease.
In this case the attack commences
in the tetras — For this reason
counterirritation is applied to dorsum,
Internally give Nit. Silver. Seton
or Issue is the next important remedy
to the Nit. Silv. in these diseases.

Case 2. Hysterical Case with Anaemia
Spells, jerking of shoulders &c. Dr. M. gives
Iron & Valerian & Counterirritation.

Med. Clinic
Dr. Mitchell

Case 3. Dysuria - Cough, weak
lungs by phlegm rising up of a
cold taste. This affection of the
stomach is depending upon a
dyscrasia of blood - When moved
portion the phlegm which is ex-
creted is more of the or phlegm more

of cold matter - More in 2 months
of double dysuria 12 gr. to be followed
by 20 drops out of a tube (that has
been long a mile or) repeat

the kind of necessary
4th - Expectative pills, at inter-
vals of unequal periods in a long
of 4 gr. - the amount of - has
also a fall when his head, the
cannot move therefore he rather
remains on the face. Must lay

horizontal & on back at the head
& the urinary

Medical Clinic

Mitchell

Case 5th. Male age 50y.

Symptoms - Dyspnoea & palpitation, the pulsations of the heart are heard by the patient himself, general irritability nervousness - These symptoms are very common in dilatation of the heart. This case appears to be one of debility of the heart with some effusion in the pericardium. No organic disease - The heart's action irritable - Give Tonics & Digitalis (Iron & Digitalis).

Case 6. Boy age 15. - Effusion in the cellular tissue. The patient has an irregular intermittent F. The case is Miasmatic Dropsy

Treatment - Digitalis Squill & Cal. also Quinia.

Case 7. Female age 42. Cessation of the Catamenia, Change of life -

Med. Clinic.

Mitchell

Nervous irritability. - Take some blood which will generally relieve the irritability &c afterwards an Issue - give Col. assafoet. & Ol. Sassafras at bed time.

Case 8. Female Apr 26. -

Symptoms - Pain extending from the hip to the ankle especially when the limb is in motion, has been of 11 years standing every day afflicted by it, but of late it got worse. It was owing

to a uterine irritation from the beginning

Treatment - Give Fr. Hier. Pica to remove the cause, for present relief apply

Ungt. Veratrina (1 gr. to 3j) or Ungt. Aconit 1 gr. to 3j

3j lard applied near the top of the affected part, the hip. She caught cold & this neuralgic affection followed immediately.

Case 9. Female - Intermit. Fever

Med. Clinic

Mitchell

The Spleen & liver affected. The patient
is anæmic, Circulation is greatly
centripetal - some Anasarca -

Treatment - You must get the skin
to resume its proper functions - There
is also great Catamenial Suppression
Give warm bath & Dover powder every
night - afterwards if necessary
other treatment will be resorted to.

Case 10. Child, age $1\frac{1}{2}$ y. Intermit.

Fever. (Tertian) Ointment of Quinia
rubbed along the spine & axillæ will
answer in Children if you cannot
administer Med. per. mor. th.

Symphinitis is present here as it often
is in Intermit's of Children. For this
rub the ointment over the Groin also &
give Fowler's Solution Two drops sev-
eral times a day - diluted with large quan-
tity of water this article may be given in

Med. Clinic

Mitchell

very large doses & long continued without
doing mischief, as it would concentrate

Case 11 Male age 37.

Chronic Diarrhoea - It is
evidently kept up by irritability -
Treatment - Carb. Ammonium, and
Acet. Plumb. with Opium.

Case 12. Child -

Papular Eruption - Caused
by vitiated blood.

Treatment - Small dose of
Calomel, once a day is sufficient,
Red precipitate ointment of $\frac{1}{4}$ the
usual strength applied twice a
day.

Case 13. Aug 20. Female Dysp-
noea, pain in the breast, flatu-
lence, owing to suppression of
the menses - Give Abolus
Canal. Alba. Hier Pic. a trit

Med. Clinic Mitchell

Spoonful at bed time preceded by bleeding. In these cases there is always some spinal irritation apply Counter irritation to 'Tales points'.

Case 14. Male age 55. Piles. The case is Anaemic.

Treatment - Injection of cold water every day before going to stool, Mitchells tonic pill.

Case 15. Male age 30. (Milwright). Symptoms - Mind depressed, is Hypochondriac - Received an injury of the head by a fall. Some irritation of the Cerebro Spinal axis. The liver may be affected -

Treatment - These Hypo. Cases are most effectually treated by bleeding every day or two for some time.

Medical Clinic Dr. Dunglison

Nov. 14. Case 1st Epilepsy of 3 years standing. In Epileptic fits you have in some consciousness unimpaired, in others destroyed —

In this case the spells occur at the Catamenial periods - the patient is Costive generally vomits sometimes when the fits come on.

Spinal affection appears to be the Cause of these cases the encephalon not generally affected. The nervous system is commonly quite impressible.

Treatment — Give animal food, Nit. Silver in pill three times a day must be increased generally add three grs. Ext. Gentian to each pill, Shower bath.

Medical Clinic Dunglison

Case 2nd. Mentagra (Barbus itch)
Seated in the hair follicles. In this
case we have the first stage of the
disease the inflammatory stage —
Apply Elm or flaxseed infusion keep
the parts constantly moist with it
afterwards other applications will be
necessary.

Nov. 16th Dr. Mitchell

Case 1st Female age 32. Has been
coughing cold, settled on her chest
with a little clear blood not mixed
with anything. Thirst, chill every
day followed by fever, not so much
now as at first — The nervous symp-
toms (Cold Stage) predominate which
is the case in Hectic sometimes —
It is clearly a case of Phthisis incipiens.
Treatment Cod liver oil, best taken in
broth of beer (as is Castor oil) Give

Medical Clinic

Dr. Mitchell

also $\frac{1}{2}$ drop *St. Valeria* & 2 grs *Quinia*
just before the period of the *Chills*
(an hour or so before).

Case 2nd. Female age 17. Oedema
of lower extremities. Retention of the
Catamenia. Give *Fr. Her Pica* a
tablespoonful every night - This is
a favorite prescription of Mitchell
& he says it is an effectual one.

Case 3rd Female age 43.

The patient is anaemic, Irregular
Catamenia - She wants a tonic
course of treatment. Give 5 grs.
Carb. Ferri 1 gr *Carb. Linc.* at bed
time.

Case 4th Female 15 years of age.
Contipitalism of blood Mucous
membranes affected

Medical Clinic Dr. Mitchell
Case 6. Old Man. Pain in
the rectum and across the loins.
For the affection of the rectum ap-
ply ointment of tar & red precipitate.
Cold water injections fail to relieve.
Dr. M. suspects the man of having
Albuminuria or some other af-
fection of the Kidneys will ex-
amine them next clinic, his
urine &c.

Case 7th Male 21. Night sweats
which were preceded by pain
in the breast. No organic dis-
ease can be discovered nothing
but an Anaemic condition of the
system appears the matter at the
present has been under treatment
Give him Iron &c.

Medical Clinic Dr. Mitchell

Case 8th Male 27 years of age - Irregular action & blowing sound of the heart of several years standing -

Give $\frac{1}{4}$ gr. ext. digitalis 2 grs. Iron 3 times a day Mustart plaster every day over the region of heart

Case 9. Child 2 years old - Lost power of motion of both legs following a fever

Prognosis unfavorable -

Give Pulv. Jalap. Comp. Phosph. lime 5 grs. Iron 1 gr every night. Shower bath adapted for this case

Case 10. Boy 5 years of age. Epilepsy fits every day sometimes. had been a sickly child but is stout now Give Nit. Silver.

Medical Clinic

Dr. Mitchell

Case 1st Nov. 21. Female age 48.

Vomiting, soreness across the breast
about two hours after eating. She does
not always throw up her food but
vomits hard & vomits mucus &c, has
hot skin white fur on tongue. It
is a case of Pyrosis - Chronic In-
flammation of Stomach -

Treatment - Give in this case 10 gr.
Sulph. Copper in the morning fasting
After this 14 gr. Nit. Silver three times
a day.

Case 2. Mentagra - an old case

Treatment 1/2 p. Pearl ash & 1/2 p. Sal.
Ammoniac in pint of Whiskey as a
wash applied three four times a day
& oftener. in many cases of this
kind you may want Constitutional
treatment - Fowler's Solution.

Medical Clinic Dr. Mitchell

Case 3rd Female age 29. Scaly eruption all over body.

Give $\frac{1}{2}$ gr. Mercury with Sarsaparilla three times a day.

Case 4th Old Man. Paraplegia. habitual Costiveness common in these cases. - Cease from drinking cold water after being over heated. Owing to Congestion or inflammation in Spine.

Treatment - Thorough depletion (topical) purges - P. Jalap Comp. Caps. every ~~day~~ other ^{day} and followed by blistering - Give Strychnia.

Case 5. Old Man. Old Case. Pain in lumbar region. Testes small. Urine shows a little albumen. This is an incipient case of Albuminuria.

Medical Clinic

Dr. Mitchell

Treatment - Give 15 grs Dover's powder every night preceded by warm bath. Temperature 100. time $\frac{1}{2}$ hour.

Case 6th Female, old Case Malaria. Continue same treatment. Cod liver oil. Sulph. Quinine & ol. Valer. The case is improving.

Case 8. Young man (Col.) been in Siberia took intermittent fever - great enlargement of spleen -

Treatment - Enlargement of the spleen caused by Malaria is best treated with Pod. Potas 5 grs. three times a day, add 2 grs. S. Quin. to every dose. Continue for a long time.

Nov. 28th 1849

Case 1st Female age 20 - Chills & fever stopped sometimes & then returns again pain in the left side over the spleen

Medical Clinic

D. Mitchell

Treatment - Give 10 gr. Ascorbic acid &

3 gr. Vitamin every morning fasting.

Also give every night - Night continue

Go for at least 21 days.

Code 2000 - 2000 cc. 30. 2000 cc.

Start to the heart. The case appears

normal. Often in these cases the

heart appears to be in fault. In

this the heart is not & the heart

code. There is an irregularity of the

heart action, slight alterations of

the heart - want of proper action

action of the blood -

Treatment - Must be done and

Stimulant - Give Calcium 1 gr

Calcium 2 gr. Calc. from 2.5 gr

These cases are

not just built for ten or fifteen

minutes then change them in

cold water, make them dry & put

Medical Clinic Dr. Mitchell
woollen stockings - this is a most
actual mode of correcting habitual
a feet.

se 3rd Female. Hectic looking the
se is Consumption. Give Black
op at night.

se 4. Boy 2 1/2 years of age -
symptoms, Swelling of abdomen -
swelling going down to the
tickle in the evening - The
swelling is probably caused by
distention produced by entangled
testis in the ring -

atment - Dislodge worms if there
any, Give Cr. Tartar & Jalap.

se 5. Little Girl, Intermit.
ter, Great swelling of abdomen.
a very common thing in
cases in children -
Give Calomel every night.

Medical Clinic Dr. Mitter

Treatment - Give 10 gr. Arsen. a. e. 2
3 gr. Quinine every morning fasting
Also give every night - Most continue
this for at least 21 days.

Case 2nd Female age 32. Rem
Stone to the heart. The case app
Anemic. Effusion in the heart

Heart appears to be in fault.
The heart is hot & the pe
ectd. There is an irregularity
heart's action, slight dilatation
the heart - want of proper di
action of the blood -

Treatment - Must be done a
Abundant - Give Quinine 1
Experience 2 gr. Cast. Iron 1

These cases a day
not fast but for ten or 14
nervous then change them
etc. water, milk, then day & night

Medical Clinic - Dr. Mitchell
on woollen stockings - this is a most
effectual mode of correcting habitual
cold feet.

Case 3rd Female. hectic looking the
case is Consumption. Give Black
drop at night.

Case 4. Boy 2 1/2 years of age -
Symptoms Swelling of abdomen -
the swelling going down to the
testicle in the evening - The
swelling is probably caused by
flatulency produced by entangled
intestine in the ring -

Treatment - dislodge worms if there
be any, Give Cr. Tartar & Salap.

Case 5. Little girl, Intermit.
fever, Great swelling of abdomen.
is a very common thing in
these cases in children -
Give Calomel every night.

Medical Clinic Dr. Mitchell

Case 6. Boy 13 years of age. Epileptic
fits, vertigo before the attack, has
had them every month since he
was 4 years old - Is intelligent
& looks well, probably caused by
worms -

Treatment - Nit Silver & Black
Snake root, B S S

Case 7. Old man 78 y. of age
Dry Itch about the genitals
has been of one month standing
not being an old complaint any
poison will kill it Apply
ointment of red ox. Mercury.

Case 8. - 7th of Nov. 17. Having
 hectic slightly Give Quinine
before the chill comes on. 3 grs
Quin. & 1 gr. Op.

Medical Clinic Dr. Mitchell

Case 9. Female age 42. Pain
in arm - a case of Neuralgia -
Apply ointment of Aconit 1 gr.
to 2 1/2 of lard - also Chloroform
internally 5 or 8 drops very good.

Dec. 1st 1849. Female age 17.

Catamenial interruption. Drop-
ical effusion in legs - is anaemic
e. Give in this case Iron and
Squills grssii & grssiii in pill three
times a day & Fr. Hier Picra.

Case 10. Female age 15. Sore
throat, 1 year standing - appears
to be owing to a constitutional
cause. Laryngeal affection, Con-
gestion or ulceration. Give Sod.
Potas. 5 grs. three times a day
afterwards apply Nit Silver per
mode of Dr. Green. A strong solution
of the Caustic applied with a

Medical Clinic

Dr. Mitchell

piece of sponge on a bent probe depress the tongue with a proper instrument.

Case 3rd Female age 21. Pain across the breast, flying up to the head. System in a state of Plethora pulse full, regular.

Treatment - Bleeding, Cathartics. There being a partial suppression of the Catamenia you regulate your purge accordingly

Dec. 5. th. 1849

Case 1st Female age 40. Suppression of Catamenia, Redness of lower extremities. No Aloes & Cant. Alba.

Case 2nd Female age 46. Pain in side from the breast through the back, Catamenia regular or nearly so. There is pain upon pressure

Medical Clinic. Dr. Mitchell
lower part of the spine at lower
"Tates point." This is generally the
case at the change of life in
men whereas in young females
the upper point is affected.

This case is therefore Neuralgia
depending on uterine sympathy
Treatment - Give Belladonna
Extract & the Citrate of Quinine &
Iron - the former to act as Anti
neuralgic & latter as tonic
Tart Antimony ointment on the
point of spine which is tender

Case 3rd Girl 11. Eruption on the
face with desquamation of the
cuticle. Apply ointment of red
Ox. Mercury

Case 4th Female age 24. Pain
in right Hypochondrium. Pulse is

Medical Clinic Dr. Mitchell
not disturbed, skin is moist, tongue
clean, pain is sympathetic from
the uterus. Cicuta is the best arti-
cle to correct uterine irritation -
give $\frac{1}{2}$ gr. three times a day.

Case 5. Boy age 8. Inflammation
of the skin with exudation of
serum forming scabs - Tar Ointment.

Case 6th Male 52. Ague.
Spleen enlarged to a great extent
Give Sod. Potas. & Arsenic $\frac{1}{2}$ gr.
gr. Arsen.

Dec. 8th 1849. Case 10th Female
age 20. Aphonia almost entire.
Has had hip disease, Scrophula.
Has a chronic inflammation in
isthmus fauce. Apply Nit. Silver
topically externally a small blister.
Exp. Conium & acet. Plumb. in pill
three times a day.

Medical Clinic Dr. Mitchell

Case 2nd Female. Scaly eruption - form of Porigo.

Shave the head & apply some kind of Ointment anything poisonous, or apply wash of Pearl ash & Chlor. Ammonia - Give internally Fowler's solution five drops three times a day increase the dose rapidly until swelling is produced showing the effects

3rd Case - Little child age 11 mo.

Large hard tumor in Mliac fossa right side extending to the Chest knotty & irregular. Probably mesenteric glands affected Scrophulous Treatment Give Sod. Potas 1 gr three times a day & apply Iodin. Ointment.

Case 4, Female 38 years of age Married. Swelling abdomen, pain.

Medical Clinic Dr. Mitchell
ful on pressure, great irritability
Spine very much affected by
pressure. Give Chloroform in So-
lution Nervines & Tonics

Case 5. Female age 18. Catame-
nial irregularity, nervous irrita-
bility. Give Assafœt & Valer.
Iron.

Case 6. Male, 24 years of age.
Intermit fever, tertian, of
2 mos. standing. Give Quinia long
continued, if this will not answer
give Arsenic sufficient to bring
the system entirely under its in-
fluence

Case 7. Boy 16. years of age. Pain
on left side at greater end of the
stomach, increased on inspiration
or coughing. It is probably a cir-

Medical Clinic Dr. Mitchell
Circumscribed inflammation of the Di-
aphragm. Apply Caps Give Cathartics
4c.

Case 8th Boy 17 years of age. Pain
left side constant. Has had ague
No enlargement of spleen to any
great extent. It is probably a neu-
ralgic affection which is a com-
mon thing in Malarious disorders
Give Quinine

Dec. 12. Case 1st Male 16 years
of age. Jaundice owing to
the liver not performing elim-
ination properly. Has had Scurvy,
liver enlarged. Obstruction owing
to mechanical cause.

Treatment - Give an Emetic, Do.
powder & warm bath. If it is owing
to Cerosis it is incurable. If organic
Give Alteratives Apply Caps Blisters. &c.

Medical Clinic Dr. Mitchell

Case 2. Male 36 years of age -

Palpitation of the Heart. Has received a jar of his breast & is depressed in spirits. Pulsations at the pit of stomach visible at a distance this must be owing to a tumor or aneurism.

Case 4. Male 18. Skin of hands & fingers swelled, hypertrophied, inflamed. Apply Arsenical Ointment & give Fowler's solution.

Dec. 15. Case 1st Female age 15 y. Chronic Dysentery. Tongue furred; bitter taste in mouth. Yellow tinge in eyes, no fever. Some pain. Give 5 grs Blue mass $\frac{1}{2}$ gr. Opium. every night. Mucilage, No animal food

Case 2nd Female age 58. Menstr. Change of life took place 6 y. ago.

Medical Clinic Dr. Mitchell
 Affection of stomach, acidity, co-
 turned. Now you have a chro-
 nic inflammation of the stomach
 treatment - Calomel & astringent
 & chalky salts.
 Case 3rd. Male 40 years of age.
 Dysphagia, Cough, 2 years standing.
 Pericardium clear lungs. Mucous
 Rattle in larynx. Chronic
 Bronchitis, Cough & Asthma
 Give Nit. Acid 15 gr. three times
 a day.
 4th Case Female age 35. Free
 in right side (Blind region) tend-
 ments on surface. Inflammation
 of the brain.
 treatment - Apply leeches &
 Give 5. China 1 grain 3 or 4 times
 a day for this disease are

Medical Clinic. Dr. Mitchell
always poisonous. Apply Oculi-
ments Res precipitat. Ungt. Sulph.
+ Ungt. Yav. equal parts. Give Hore-
as solution. Ungt. Iod. Sulph an
excellent article. Wash after

Case 6. Male age 26. Nervous case.
Give Nitrat Silver. —

January 2nd 1850.

Case 1st Dr. Dunglison

Girl age 10. Case of long
standing. Partial palsy. Loss
of voluntary motion muscular
power of lower extremities -
Ague has lately supervened. Has
been taking Nux Vomica & Salt
water bath

Treatment - excite the sentient
extremities of the nerves by fric-
tion.

Medical Clinic Dr. Darglison
Case 2. Male age 32. Nervous debility from venereal disease which has been cured, leaving the system debilitated. Give Carb. Ferri and animal food.

Case 3rd Male age 20. Palpitation of the Heart - thinks it was brought on by over exertion. Any exertion will ^{agitate} the heart very much anything will startle the patient. No organic disease. Faulty innervation.

Treatment - Give Iron.

Case 4th Female age 29. - Pain in back, side & breast, bad cough of long standing, has spit blood of dark colour. When she spits blood she feels chilly which is about noon every day. Slight difference between the two lungs on Percuss.

Medical Clinic Dr. Dunsford

Acron. Anacardium also known as

acorn. Evidence from

of Lathwell on left side.

Heaviness - from the

cooling air. Also

to alter nutrition & unknown

system and thereby bring

condition into a

Case of female aged 60

affection of throat, coated

inflammation of heart the

abdomen. Emphysema of

from. By means of

from. By means of

from. By means of

from. By means of

from. By means of

from. By means of

from. By means of

Medical Clinic Dr. Dunglison
January 5. 1850

Case 1st Female age 53.

Rheumatism arms & legs &c. Can't
bear heat well. joints swelled
some. Bowels very costive.

The case being more Neuropathic
than inflammatory Give some
preparation of bark. three times
a day. Dry rubbing night & morning

Case 2nd - Female age 52.

Pain in breast, Cough of two
weeks standing, Spits up a great
deal, Sputa mixed with blood.
Dyspnoea when cough comes on.
No heat of the skin therefore it
is not pneumonia as this symp-
tom is one of the most frequent ac-
companiments in Pneumonia

She has a burning pain in the
right side.

Medical Clinic Dr. Junglison

Case 3rd Female age 64.

Pain in stomach the pain rises
to her shoulder. Wind on her stom.
Bowels Costive.

R. Carbo Signi gr. xv

Magnes. Carb. gr. x

Zingiberis P. gr. x

Several times a day

Case 4th Male age 26.

Cough, Spits blood sometimes
Pain through chest.

Give Cod liver oil.

January 9. 1850

Case 4th Female age - Has
an eruption on the Alae nasi
acrae. - Apply Collodion
& give Fowler's solution. The
Collodion will act on the diseased
hair follicles by ~~causing~~ making
~~contraction~~ its compressing effects

Medical Clinic Dr. Darglison
forcing out the matter and coating
the skin thereby preventing access
of air

Case 2nd Male Has had "Sun
Stroke", had lost power over left
side to some degree - Is getting
better but has some pain & side
of his head which will probably
be relieved by counterirritation.
Apply Ungt. I. Ant. to the nape
of the neck

Case 4. Male age 45.
Dry Cough, pain in left side
from the beginning, low down
rather external. Patient is
labouring under a Cachexia which
may run into tubercular Cachex.
Treatment - Put him under
influence of Cod liver oil.

Surgical Clinic. - Dr. Matter & Pancoast

Case 1st Symptoms - Scrophulous - probably hip joint disease from the way he walks. He has Ankylosis of the hip joint. Has an abscess on thigh. probably Necrosis of the thigh bone.

Treatment Open it & apply Iodo-poultice.

Case 2nd Hypospadias - deformity of the penis - urethra not extending sufficiently. Urine is discharged at an opening near the scrotum.

Cure the deformity by taking a wedge shaped piece off Corpus Cavernosum, apply a splint to the organ after the operation to support it until the wound is healed afterwards a new urethra can be formed from the skin.

Surgical Clinic Matter & Panecost
The operation - Strip the prepuce back
dissect it sufficiently back off Corpus
to cavernosum to take off a piece large
enough.

Nov. 7. Case 1st Chronic Cis-
titis. Give Buchu uva ursi
juniper berries & Cr. Tactor.

Case 2. Paraphymosis - It
is not often necessary to perform
an operation. The best treatment
is to puncture the swelled prepuce
& press out the serum where neces-
sary then bathe the Glans &c in cold
water to make it contract you
can then reduce it by kneading -
pressing the Glans back & pulling
the prepuce forward

Nov. 14. Case 1st Chancres & Bubo
Apply Nit. Silver to the Chan. or
followed by Port Wine or other aro-

Surgical Clinic Mütter & Pancoast
Mastic wine with a piece of lint
changed 4 times a day. Give ~~4gr~~
Iodide of Mercury. Apply a blister
to the Pub. Apply a blister to the back
first afterwards Iodine ointment of
the strength of Rj to Zj laid. If this
does not bring on suppuration apply
poultice.

Case 2. Phagedenic ulceration of
Glans penis - venereal. Here no
Mercury is used, purging, perhaps
tonics. Apply stimulating washes
locally. If phagedena spreads wash
it over with H. Iodine .

Case 3rd Onychia - The only
way to relieve these cases by
pulling the nail out & apply Can-
tie afterwards apply poultice. This
case has been treated by some Surgeon for
5 Mo. & is not improved any at all

Surgical Clinic - Mutter & Pancoast
Pull out the nail & treat as above
& it will be well in a week.

Nov. 17. Case 1st

Chronic Deafness - Dr.
Pancoast applies the following
Liniment

R. Copaiba ℥ij

Ol. Oliv. ℥ij

Ol. Cajuput ℥ij

with a few grs Camphor: ap-
plied with a Camels hair pencil.

Nov. 28th Case 1st -

Caries of Wrist Bones

This case is in the second stage,
no pain on introducing the probe
whereas if it were in the first stage
pain would be severe.

Treatment - Rest the limb give
Constitutional remedies Iodine & Iron

Surgical Clinic Mutter & Pancoast
apply a blister over the whole dis-
eased part. Dr Mutter will try this,
if it fails will take away the
diseased bone

Dec. 1st Case 1st Hypopion-
pus in anterior chamber of the
Eye - Depending upon a specific
Cause. Requires prompt treat-
ment - bleed from the arm
in the first place apply Coun-
ter irritation, hot pediluvia, Mer-
cury. This will effect absorption
but if distention of the Cornea
threatens bursting you must open
with the couching needle.

Case 2nd Ptery Cataract. It
~~was~~ caused by a blow on the
eye ball. Here there is Amaurosis
present known from the fact
that no light is perceived through the

Surgical Clinic Mutter & Pancoast
upper part of the eye which is clear in
this case. No operation is therefore
proper. The other eye is beginning to
suffer, apply a seton in the neck.
Case 3. Orchitis. Apply leeches
suspensary bandage, keep patient
down, give mercury & touch gums.
if Chronic ^{type} ~~the~~ suspensary truss
with oiled silk which will keep
up perspiration

Dec. 8th Case 1st. Ostitis.
Enlargement of the limb (os tibia)
redness, pain which is increased
by shocking the limb.

Treatment - Apply leeches, elevate
the limb, give purges - do this until
the inflammation goes into Chronic
form then apply blisters give *Sod. Potas.*
Acrodynes at night.

Surgical Clinic Mutter & Pancoast
Dec. 8th 1849 Case 1st.

Onychia Maligna - ulceration
around the nail of the right thumb.
The follicles or root of the nail is
the seat of the disease. You
must take away the nail with
forceps & apply powerful eschar-
otic to destroy the roots or un-
healthy action of them.

Case 2. - Disease of the finger
nails Hypertrophy or inflam-
mation of the follicles secreting
the nails - Causing the nail
to be thick &c

Treatment - Blister the roots
of the nails & give Donovan's
solution

Case 3. Moli metangere or Lupus
exedens. Open malignant ulcer

Surgical Clinic Matter & Paronychia.
These cases are at first superficial
are not tuberculous - these are on
bone penetrating through the bone.
Treatment - Give Donovan's sol-
ution & apply at first mucilage
if this is not sufficient apply red
precip. ointment.

Case 4th Nail Curved and
growing downwards on one side
into the flesh -

Cut a triangular piece out of the
centre of the nail. Scrape the mid-
dle of the nail thin the whole
length & keep it thin.

Case 5. Staphylococci both Eyes
hypertrophy of the Cornea consequent
upon inflammation. If complete
all you can do is to remove the tu-
mor - While forming you can
cure it by touching with Nit Silver
several times a week - In this case

Surgical Clinic. Mutter & Pancoast
after opening the Cornea as you do
in cutting off the tumor you may
have a fungus mass in a few
days occupying the seat of the
tumor, if so cut that off also

Dec. 18. Case 1st Neuralgia
of the eye ball, great pain
but no unnatural appearance

Apply a blister behind the
ear. Give Colchicum & Mag-
nesia - Veratrum ointment over
the eye.

Case 2. Diplopia (double
vision)

Camphor in solution with ether
(saturated) and a few drops op. sol.
monia - Tooth ache.

Mitchell

Small Pox

Scabiility continued — All are liable to it, Fetus in utero may be attacked.

The disease generally begins in spring and ends in winter. It does not recur as a general rule, but may.

Greatest mortality in very young & very old. Greatest danger 7th or 9th day of eruption. About the 15th year of age the least danger.

Mortality commonly about 1 in 4.

Treatment — In preliminary stage ^{seem to} treat the symptoms as they may require, except in regard to purging & vomiting. If the case is mild give cooling drinks and farinaceous diet, keep patient cool. In grave cases use stimuli light or high, according to symptoms. Cold water is an important agent. Astringent gargle for the throat if it is sore, or

Mitchell

Small Pox

if very sore use Cayenne pepper or Sulp. Lime or Sulp. Copper. At the moment you expect the disease vaccinate the person, you may modify the disease even if some progress has been made by it. Eruption appearing the Cold is not to be taken away. Prevent the disfiguring of patient by application on 1st 2nd or 3rd day of the eruption of a plaster made of equal parts of Siltstap & Blue ointment spread on a piece of linen; light is said to cause the marks. After the vesicular stage has passed there is no use applying anything. The chief aim ought to be to prevent disfiguring. Velvet covering to ears, protection to face & hands.

Relieve Costiveness in Adults & Diarrhoea in Children. In some instances warm applications instead of Cold.

Variceloid

In this disease the vesicles become brown on 2nd day eruption is earlier than in variola. There is no pitting, no secondary fever no danger in common forms.

Treat according to symptoms.

Mitchell

Vaccination &c.

Vaccination practice first in 1777.

Choice in matter - most potent - that obtained from the vesicle between 4th & 8th day. Colour should be a pale yellow straw colour. Scab should be mahogany colour round regular in form & small.

To vaccinate powder it & reduce to fluid form. To preserve the scab wrap it in paper, over this, bees wax with a candle fused over it. If scab appears fibrous or stringy it is not good. After 6th day of infection patient is protected whether the scab is rubbed off or not. May vaccinate at any age even at birth.

About 7th or 8th day a great change takes place in the vac. the areola extends & there is an accompaniment of fever. From the first or second day the center begins to pit until 9th day it begins to decline. On 7th day it has a mahogany colour getting darker & darker & the scab comes off about the 2nd week areola largest on 9th or 10th day. The cicatrix radiated,

Mitchell

Vaccination

regular & having little pits the scar
is good. The virus if obtained from
the Cow is twice as potent as that
which has been long in use. Re-
vaccination from this will often
take when it would fail with
the other.

~~Dr. J. G. Kelley's Symplic Drop~~

R. Ether 3℥ss
Paragon. 3j
Saud. 3j

~~Wash away with water~~

~~Wash away with water~~

Def. x
6 Equal parts of bay rum &
good brandy and three parts
of olive oil (all good articles).
For the hair, apply once a day.

